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ABSTRACT

This publication presents K-12 tobacco use prevention lesson plans for schools in the state of Montana. Lessons for students in grades K-6 include: family connections; body tracing; smokeless tobacco; prenatal development; tobacco look-alikes; tobacco chemicals; analyzing tobacco and alcohol ads; tobacco use and the lungs; and a personal health survey. Lessons for students in grades 7-12 include: assertiveness and tobacco; long-term effects of tobacco on the body; tobacco advertising; decision making; understanding choices; resisting temptation; drugs and crime; nicotine addiction; the media myth; and the tobacco industry. Each lesson includes: the objective; life skills addressed; teaching facility required; necessary equipment and materials; information; classroom arrangement; instructional strategies; and resources. (SM)

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ED 452 158

TOBACCO USE PREVENTION EDUCATION

K-12 Lesson Plans From the Montana Model Curriculum for Health Enhancement

SP039889

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Health Enhancement

Health Enhancement teaches children the importance of achieving and maintaining a healthy lifestyle. It helps them actively protect, maintain and improve their health. Health Enhancement sensitizes children to society's critical health issues. It is within this context that these materials which are specific to Tobacco Education are presented. As part of the overall health enhancement curriculum, may the knowledge gained in this subject area bring about an understanding of the consequences tobacco use has on our society.

Montana Office of Public Instruction

TOBACCO USE PREVENTION

Grades K-6

Lesson plans and materials that are specific to Tobacco Use Prevention, taken from the Montana Model Curriculum for Health Enhancement

Grade **2**

LEVEL: *PRIMARY*

BODY TRACE

OBJECTIVE:

To be able to understand the effects of tobacco on the body.

LIFE SKILLS:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

Butcher paper for each student (length should equal student's height), colored markers and crayons, pictures of body organs (heart, lungs, brain, etc.) damaged by tobacco.

INFORMATION:

Our lifestyle decisions affect our bodies. Tobacco use makes lungs black, makes the heart enlarged and shrinks our blood vessels. Using tobacco, therefore, will keep students from reaching their physical potential.

INSTRUCTIONAL STRATEGIES:

Students should be in pairs and can take turns tracing their partner's body on butcher paper. Draw a vertical line through the middle of the outline. Have students draw healthy organs on one half of the paper and unhealthy organs on the other half. Discuss the differences with the students and illustrate the importance of not putting something as unhealthy as tobacco inside human bodies.

RESOURCE:

Adapted from Salt Lake City-County Health Department, Salt Lake City, Utah, 1993.

Grade 2

LEVEL: PRIMARY

LET'S BE SMART ABOUT SMOKING AND ADVERTISING

OBJECTIVE:

To teach students about the consequences of the tobacco industry's presentation of tobacco.

LIFE SKILL:

To increase the ability of students to make healthy decisions.

TEACHING FACILITY:

Classroom.

EQUIPMENT AND MATERIALS:

Pictures of people smoking taken from magazines. Camel advertising pictures of Joe and Josephine Camel. Poster board and crayons.

INFORMATION:

Tobacco companies spend millions of dollars every year advertising and promoting their products. Advertisers make tobacco use look glamorous and exciting and the ads make students think they will be more popular and pretty/handsome if they use tobacco. Discussing this advertising strategy can alert students to the truth—that this is paid advertising that is not giving a true picture about tobacco addiction.

INSTRUCTIONAL STRATEGIES:

Show examples of ads and ask students if they think ads tell the whole truth about the product. Do they tell the harmful things that can happen from using the product? To make us buy something or believe something they use: comparison techniques for advertising—being healthy; appeal techniques showing the glamour, fun adventure, romance, new invention, and beauty.

Next, discuss Joe and Josephine Camel. Show students pictures of both. Ask students what type of an animal they are and what are they doing. Ask if they would like to look or smell like a camel. Ask them why they think a cartoon character is used.

Have students cut out a smoker from a magazine and place it on a piece of poster board. Have them draw people in the background reacting to the smoke. Ask students what effect does it have on people around them.

End the session by having students make their own warning advertisements about tobacco use.

Resources:

Adapted from Wasatch County Health Department, Utah, 1993.

Grade 3

LEVEL: PRIMARY

HABITS SCAVENGER HUNT

OBJECTIVE:

To understand the risk factors to cardiovascular health.

LIFE SKILL:

To promote physical activity and exercise as part of a healthy lifestyle.

TEACHING AREA:

Large open area (indoor or outdoor).

EQUIPMENT/MATERIALS:

Eight boxes containing either cards or materials that represent healthy or unhealthy habits and eight scavenger lists that correspond to the cards or materials in the boxes.

INFORMATION:

Many risk factors such as inactivity, smoking, obesity, diet, stress and high blood pressure contribute to cardiovascular disease. These risk factors can be decreased by developing healthy habits of living.

CLASS ARRANGEMENT:

Divide class into eight equal groups.

SKILLS NEEDED:

Knowledge of healthy habits, reading skills, running skills.

INSTRUCTIONAL STRATEGIES:

Each group of students will be given a scavenger list of healthy and unhealthy habits. The eight boxes are set at locations around the gym or open area so that the students will have to run from box to box in order to hunt for the items in that box that are listed on their scavenger list.

The team will work together within 15 minutes (or whatever time the teacher establishes in order to make the students run from box to box to complete their hunt) to visit each of the eight boxes and find an item or card that represents the healthy or unhealthy habits on their scavenger list.

Because of the time limit on their collection and the spread out location of the eight boxes, they will have to run between boxes. At the end of the allotted time, the teams will be called in. They will explain how each card or item fits their scavenger list. The team(s) with the most correct items will receive "healthy habits" certificates for their effort and knowledge.

Evaluation/Modification:

The scavenger hunt cannot be repeated until sufficient knowledge of healthy habits is demonstrated. This game can be extended to cover other health knowledge, and will continue to promote cardiovascular fitness through the activity of running.

Smokeless Tobacco Medical Facts

1. Nicotine is contained in all smokeless tobacco products. Nicotine is absorbed in surface mucosa (skin) and in the respiratory tract.

2. A rise in serum nicotine level is noted five minutes after tobacco is in place.

3. There is a significant alteration of cardiovascular output: increases heart rate, increases blood pressure, decreases cardiovascular output, decreases maximum oxygen consumption, decreases stroke volume, decreases cardiac output.

4. The tobacco juice is carcinogenic. The tobacco chemicals are suspected as a cause for oral cancer, chronic inflammation of the gum and have the potential of promoting cavities.

5. Users desire the "quick buzz" or "nicki buzz" associated with smokeless tobacco use.

6. The smokeless tobacco habit can lead to oral cancer (lip, tongue, palate, and esophagus). Oral cancer requires extensive surgery and can be cured only if the spread of cancer cells has not occurred to the lymph nodes.

7. Smokeless tobacco can cause bad breath, discolored teeth, gum recession, tooth abrasion, decrease smell ability, decrease taste ability, and leukoplakia (chronic inflammation of the gum–white patch which is considered to be pre-cancerous and is commonly caused by carcinogens in tobacco juice).

Eight Warning Signs of Oral Cancer

1. A swelling, lump or growth anywhere on the lips or in the mouth.
2. A white or red patch on the cheek or gums.
3. A sore that does not heal in two weeks.
4. Numbness or tingling in the mouth or in the face.
5. Sores or moles that suddenly change color or size.
6. A persistent cough or hoarseness.
7. Difficulty in swallowing.
8. Bleeding in the mouth for no known reason.

Grade 3

LEVEL: PRIMARY

SMOKELESS TOBACCO

OBJECTIVE:

To demonstrate the dangers of smokeless tobacco.

LIFE SKILL:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

Eight warning signals of oral cancer and smokeless tobacco medical facts (see Grade 3 Handout Masters).

INFORMATION:

Children are very vulnerable to smokeless tobacco use and often start using at a very young age. There are several types of smokeless tobacco.

1. Snuff—(dip) a finely cut powdered tobacco placed in a can; popular brands are Copenhagen, Skoal, and Kodiak. The user places a "pinch" of tobacco between the lip and gum, then sucks the tobacco until it's time to spit out the juices. The average user dips 1.5 cans per week. Dipping one-third of a can equals the nicotine level of smoking 20 cigarettes.

2. Loose-leaf—(chew) are loose leaves of tobacco placed in a foil-lined pouch; Red Man is a popular brand. The user places a "chaw" or "quid" of tobacco between cheeks and gum, then sucks the tobacco until it's time to spit out the juices. The average user chews for 1-3 hours.

3. Plug—(brick) is compressed tobacco leaves placed in a cellophane wrapper; a popular brand is Days O' Work. The user cuts off or bites off a segment of tobacco, places the tobacco between the cheek and gum, then sucks the tobacco until it's time to spit out the juices.

Instructional Strategies:

Review the types of smokeless tobacco with the students. Discuss the health effects of this habit by reviewing the medical facts and the eight warning signs of oral cancer.

Resources:

Adapted from Southwest Utah District Health Department, Utah, 1993.

Grade 4

LEVEL: INTERMEDIATE

PRENATAL DEVELOPMENT: TERRIBLE TERATOGENS

OBJECTIVE:

To understand fetal growth and development.

LIFE SKILL:

To promote personal, family and community safety as part of a healthy lifestyle.

INFORMATION:

Fetal development begins at "Day One" of conception and continues through nine months of pregnancy. Fetal development is affected by a variety of factors including nature and nurture.

Nature: Genetic and chromosomal abnormalities.

Nurture: Environmental, including teratogens, i.e., common teratogens include diseases, drugs, and pollutants. The diseases include common viruses, parasites, sexually transmitted diseases, rubella (German measles) and HIV. Many common medicines are teratogenic; however, the most widespread and destructive teratogenic drugs are social drugs including tobacco, alcohol, marijuana, and cocaine. Several pollutants, among them lead, mercury, PCBs, and radiation, are teratogenic.

INSTRUCTIONAL STRATEGIES:

Use charts and models to demonstrate stages of development of the human fetus. (Instructional packet from the March of Dimes: You, Me and Others, and Risks and Results: Making Responsible Life Choices.)

Students should keep a log of everything they eat or ingest during a 24-hour period. In class, have them list what their parents or other adults may have eaten or ingested during the last 24 hours.

The point of the exercise with both child and parent is to show how vulnerable the developing fetus may be to teratogens. For example, during the early stages of pregnancy, ingestion of cold capsules, cough syrups, beer or cigarettes may injure the fetus.

Evaluation/Modification:

New parents may bring an infant to class. Interview parents about what steps they took during the pregnancy to help "grow" the best possible infant.

Resource:

Berger, K. S., The Developing Person Through the Lifespan, New York: Worth Publishers, 1994.

Grade 4

LEVEL: PRIMARY

TOBACCO LOOK-A-LIKES

OBJECTIVE:

To recognize candy/gum packages that resemble tobacco products.

LIFE SKILL:

To learn how to make healthy life choices.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

Package of cigarettes
Package of candy cigarettes
Package of chewing tobacco
Package of "Big League Chew"
Tin of snuff
Tin of bubble gum tape

INFORMATION:

Making healthy choices can sometimes be confusing. We often learn habits without really thinking about them—subconsciously. There are some products that are not harmful that are designed to look like products that are harmful.

INSTRUCTIONS:

Initiate this exercise with a discussion of the hazards of using any tobacco. Explain to the students that we learn habits without thinking about them. Present the tobacco products to the students so they have an awareness of what is being sold. Next, present the candy/gum products that correspond to the tobacco items. Discuss making a wise choice and avoiding candy/gum that is packaged similar to tobacco products. Tell the students that there is no tobacco in the candy look-alikes and these products are not nearly as harmful as using tobacco, but the association with the package at an early age will only bring the students one step closer to handling the same type of container at an older age. That container may contain tobacco. Their mind will accept a

tobacco product easier if there has already been some type of association with it. Close the discussion by having students make a list of candy/gum that they like that does not come in packages similar to tobacco.

RESOURCES:

Adapted from the Bear River Health Department, Utah, 1993.

Grade
4

LEVEL:
PRIMARY

TOBACCO CHEMICALS

OBJECTIVE:

To understand the chemicals in cigarettes; effects on the body due to cigarette use.

LIFE SKILL:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as parts of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

Cigarette Chemicals (see Grade 4 Handout Masters), lighter or match, cigarettes, "Smokey Sue" doll (which can be borrowed from the American Lung Association of Montana).

INFORMATION:

There are many poisons that enter a smoker's body. These chemicals accumulate over time to weaken the health of the smoker.

INSTRUCTIONAL STRATEGIES:

Discuss the three main chemicals found in cigarettes (tar, carbon monoxide, and nicotine). Discuss the effects of each of these chemicals on the body. Explain that you are going to light a cigarette and let "Smokey Sue" smoke it. Show the test tube provided with Sue that collects the tar prior to lighting the cigarette and then after it is smoked. Ask the students to imagine what a person's lungs would look like after 20 cigarettes, after several packs, and year after year. Ask them if this is what they want their lungs to look like.

Optional homework: Pass out the handout on chemical compounds (see Grade 4 Handout Masters) and have the students list all the products they can find in their house with at least one of the chemicals.

RESOURCES:

Bear River District Health Department, Utah, 1993.

CIGARETTE CHEMICALS

Cigarettes are dangerous because they contain (or produce) poisonous substances like tar, nicotine and carbon monoxide.

TAR is the common name for a mixture of substances that is produced as the tobacco burns.

- Has been found to cause or promote lung cancer.
- A sticky brown residue with hundreds of chemicals which includes several carcinogens (cancer-causing substances).
- Benzopyrene, one of the deadliest carcinogens known, is found in cigarette tar.
- A pack a day smoker inhales 1/2 cup (4 oz.) of tar a year.

NICOTINE is an oily compound which can kill instantly in pure form.

- An injection of one drop (70 mg.) will kill an average-size man within a few minutes. Most cigarettes, however, contain somewhere between .2 mg. and 2.2 mg.
- A poisonous drug found in tobacco (used as an insecticide).
- Acts as a stimulant causing your heart to beat 10-20 beats more per minute and blood pressure to go up.
- Makes your blood vessels constrict which causes the temperature to lower in toes and fingers.
- For most smokers, nicotine is psychologically and physiologically addictive with tolerance and withdrawal problems.

CARBON MONOXIDE is another deadly poison found in cigarette smoke.

- The most dangerous gas in a cigarette (also found in car exhaust).
- Decreases the ability of the blood to furnish the body with the necessary amount of oxygen.
- Produces shortness of breath.

CHEMICAL COMPOUNDS FOUND IN CIGARETTE SMOKE
(ONLY A PARTIAL LIST)

Acetaldehyde: Relative to formaldehyde

Acetone: Found in nail polish remover

Acrlein

Ammonia: Cleaning fluid

Arsenic: Poison

Benzoapyrene: Carcinogen

Butane: Fuel

Cadmium: Used to make batteries, heavy metal, hazardous waste, Poison, carcinogen

Carbon Monoxide: Prevents gas exchange in lungs. Car Exhaust

Chrysene: Carcinogen

Cresol: Poison

Formaldehyde: Embalming fluid

Hydrogen Cyanide: Poison. Similar to chemical accident in Bopal, India

Hydrogen Sulfide: Respiratory irritant. Can be deadly.

Methanol: Wood alcohol. Causes blindness. Converts to formaldehyde.

Methylchrysenes: Carcinogens

Methyl Chloride

Methyl Ethyl Ketone: Carcinogen

Methyl Nitrite

N-heterocyclic Hydrocarbons: Car exhaust

Nickel: Carcinogen, Heavy metal

Nicotine: Addictive. Causes death if injested. Paralyzes cilia in respiratory tract

Nitrogen Dioxide: Brown smog

Nitrogen Oxide

Nitrosamines: Carcinogens

Nornicotine

Phenol: Class B poison. Experimental anesthetic. Mutagen. Carcinogen

Pyridine: Mutagen. Causes CNS depression, kidney and liver damage.

Stearic Acid

Vinyl Chloride: Carcinogen. Poisonous gas. Implicated in liver damage. Is absorbed through the skin. Found in plastics. Can kill in 30 minutes.

HOUSEHOLD ITEMS CONTAINING CHEMICALS FOUND IN TOBACCO

STEARIC ACID

Elastin Collagen
Cover Girl Mascara
Colgate Aftershave
Vaseline Intensive Care Lotion
Wondra Skin Lotion

BUTANE

Right Guard Deodorant
Brut Faberge Deodorant
Aqua Net Hair Spray
Hair Spray Glitter

FORMALDEHYDE

Faberge Organic Wheat Germ Oil & Honey Shampoo
Revelon Nail Enamel

AMMONIA

Magic Sizing Fabric Finish
Windex Window Cleaner

ACETONE

Cutex Nail Remover

PHENOL

Carmex Lip Balm

STEARIC ACID & BUTANE

Gillette Foam Shaving Cream

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Grade 5

LEVEL: INTERMEDIATE

GO FOR THE GUSTO?
ANALYZING TOBACCO AND ALCOHOL ADS

OBJECTIVE:
To explore the image tobacco and alcohol manufacturers attempt to portray to increase sales of their products.

LIFE SKILL:
To discourage the use of alcohol, tobacco and other drugs, and the responsible use of prescription drugs as parts of a healthy lifestyle.

TEACHING FACILITY:
Classroom.

EQUIPMENT/MATERIALS:
Lots of old magazines which have alcohol and tobacco ads; two Advertisement Worksheets per student in class (see Grade 5 Handout Masters); scissors and pencil for each student

INFORMATION:
Advertising for tobacco and alcohol products varies according to the population that the manufacturer is trying to reach. The purposes of marketing research are to identify the consumer's needs and develop advertising that represents a product as being able to satisfy those needs.

CLASS ARRANGEMENT:
Individual or partner work.

Instructional Strategies:

1. Have each student find two alcohol or tobacco advertisements from a magazine. Have each student fill in a worksheet for each product as they study the advertisement.

2. Share the advertisement worksheets in small groups, a few presented to the whole class, or make a bulletin board to display one from each student.

Evaluation/Modification:

As an example, the teacher may want to show an advertisement on the overhead first, then show a completed example of the worksheet for that ad on the overhead. Other variations include videotaping alcohol ads on TV. Analyze using same worksheet.

Name:_____

ADVERTISEMENT WORKSHEET

1. Product:

2. Description of ad:

3. This ad appeals to what basic need or desire?

4. What type of image is the product trying to portray (sophisticated, romantic, cool, cowboy, etc.)?

5. Does the ad give an honest portrayal of the product? Why? Why not?

6. What are the suggested results or outcomes of using this product? Will the suggested results be achieved? Why? Why not?

7. List three alternatives to meet the need suggested in the ad. Could another product be substituted to meet the need? If so, what? If not, why not?

   a.

   b.

   c.

Grade 5

LEVEL: PRIMARY

TOBACCO USE AND THE LUNGS

OBJECTIVE:

To understand the basic physiology of the lungs and unhealthy effects of tobacco use.

LIFE SKILLS:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as parts of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

Handouts on the normal lung, bronchitis, emphysema, and asthma; "Smoking and Your Body" handout (see Grade 5 Handout Masters).

INFORMATION:

Smoking causes many negative health effects on your body. Quitting smoking even for 20 minutes can decrease those effects if permanent damage has not been done.

INSTRUCTIONAL STRATEGIES:

Discuss the makeup of the normal lung. Review the normal lung handout; review the handouts on bronchitis, emphysema and asthma. Ask students how tobacco use could lead to development of these illnesses. Share with students the permanent damage apparent in these illnesses; refer to chemical compound list. Review the fact sheet on quitting smoking. Invite the students to compare the permanent damage caused by smoking with the positive changes experienced by those smokers who quit. Remind students the best policy is to never start using any tobacco.

RESOURCES:

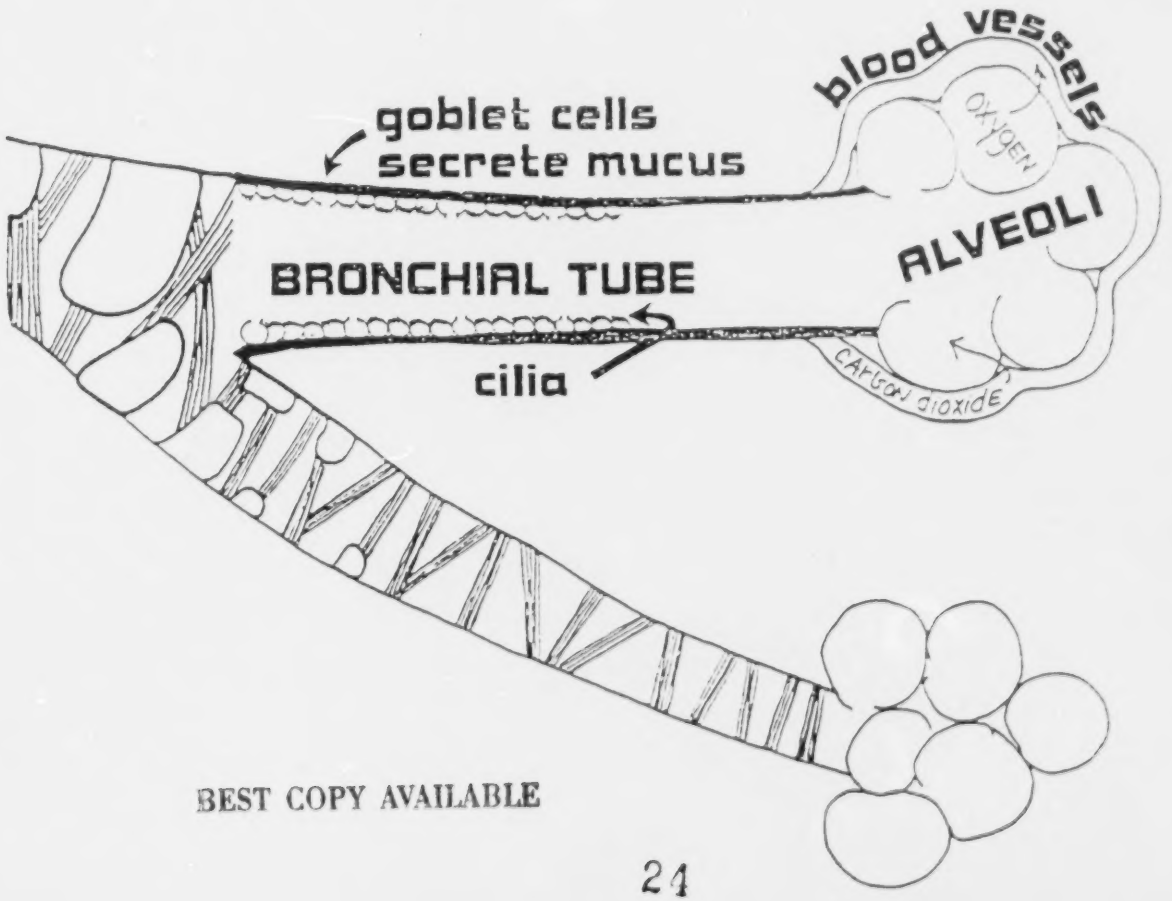
The American Lung Association of Montana, 825 Helena Avenue, Helena, MT 59601, 442-6556 and the Southwest Utah District Health Department, Utah, 1993.

THE NORMAL LUNG

Oxygen (air) is needed for all body cells. The purpose of the lung is to get oxygen into the body and give carbon dioxide gas a way out. The diaphragm, a muscle located directly below your lungs, does most of the work of breathing. It moves the lungs up and down as you breathe in and out.

The lung has five sections (lobes). Three lobes are in the right lung and two are in the left. Airways (bronchial tubes) spread through the lungs like branches on a tree. The bronchial tube walls contain muscle and expand and relax as you breathe. Millions of thin, elastic air sacs (alveoli) are at the ends of each airway. When you breathe in, these elastic sacs open up like balloons then collapse quickly as you breathe out. These sacs are surrounded by blood vessels. It is here that oxygen gets from the lung into the blood stream and is carried to all parts of the body. In addition, carbon dioxide gas is brought to the lung through the blood stream and breathed out. As you read on, you will see that asthma, bronchitis and bronchiectasis are diseases of the airways (bronchial tubes). Emphysema is a disease of the air sacs.

A thin layer of mucus covers the inside of each airway. This is given off by Goblet cells. There are also cells with brushlike borders called cilia. These brushes or cilia move this thin layer of mucus towards your mouth like a "moving flypaper." This helps you cough out dust and other particles which got caught in the mucus as you breathed in.



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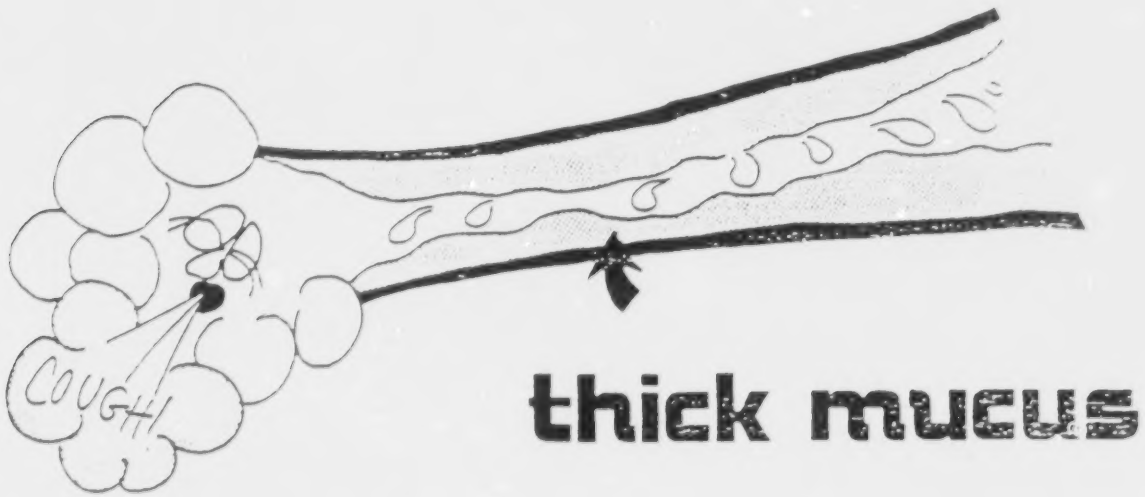
BRONCHITIS

Bronchitis is also a disease of the airways. The symptoms are excess mucus, coughing, wheezing or chest tightness. Early symptoms of bronchitis are frequent clearing of the throat or daily coughing which produces tiny amounts of sputum.



Normally, there is a thin layer of mucus in the bronchial tubes. When you have bronchitis, infections or irritations such as smoke or dust cause mucus glands in the airways to give off larger amounts of mucus. This leaves less room for air to get through, causing you to wheeze or whistle as you breathe. Thick mucus plugs sometimes close up small airways completely.

The presence of this extra mucus leads to further irritation, infection, swelling and narrowing of the airways. This slows down or stops the natural ability of the cilia (brushes) to move mucus and particles out of the lungs. All these things lead to the condition we call bronchitis.

Cigarette smoke paralyzes cilia for a time, and the morning "cigarette cough" noticed by so many smokers and regarded as unimportant is often the first sign of serious lung disease. The American Lung Association says that people who cough and spit up any mucus at all on most days for three months of the year for two consecutive years have CHRONIC BRONCHITIS.

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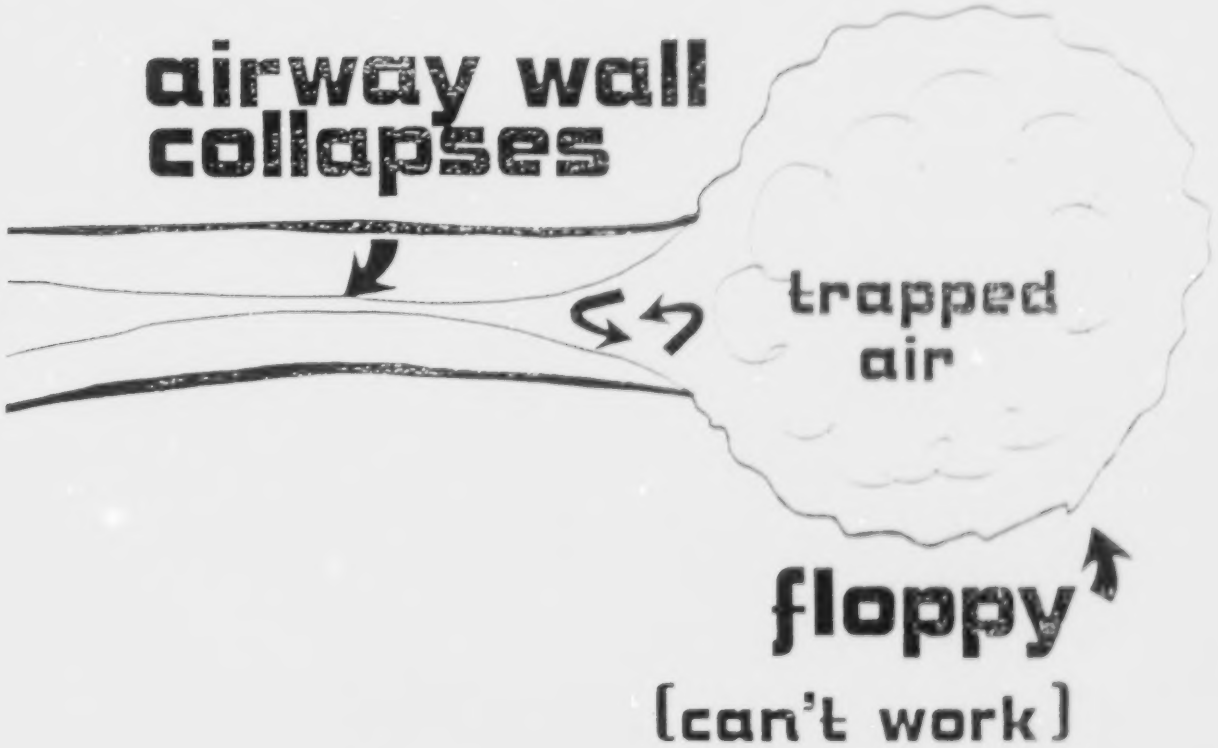
EMPHYSEMA

Emphysema is a disease of the air sacs, the elastic tissue at the ends of the airways. Early symptoms are shortness of breath or chest tightness on slight effort.

Normally, when you breathe in and out the air sacs and airways expand and relax. With emphysema, the air sacs no longer have their stretchy or elastic quality. They become big, floppy bags which cannot spring back to let air out of your lungs. Smaller airways, which are usually held open by the elastic pull of the air sacs, and many blood vessels around the air sacs close down. These conditions trap air in your lungs and reduce the lung's ability to exchange oxygen for carbon dioxide. You feel tight in the chest or short of breath.



As you begin to feel out of breath, you may try to breathe faster. This only traps more air in your lungs and over the years causes lung enlargement.

There is nothing you can do to get rid of emphysema, but PURSED LIPS BREATHING helps prevent collapsing of small airways, less air trapping, chest tightness and shortness of breath. Slow pursed lips breathing helps keep these airways open so the stale, trapped air can get out and fresh air can get in.

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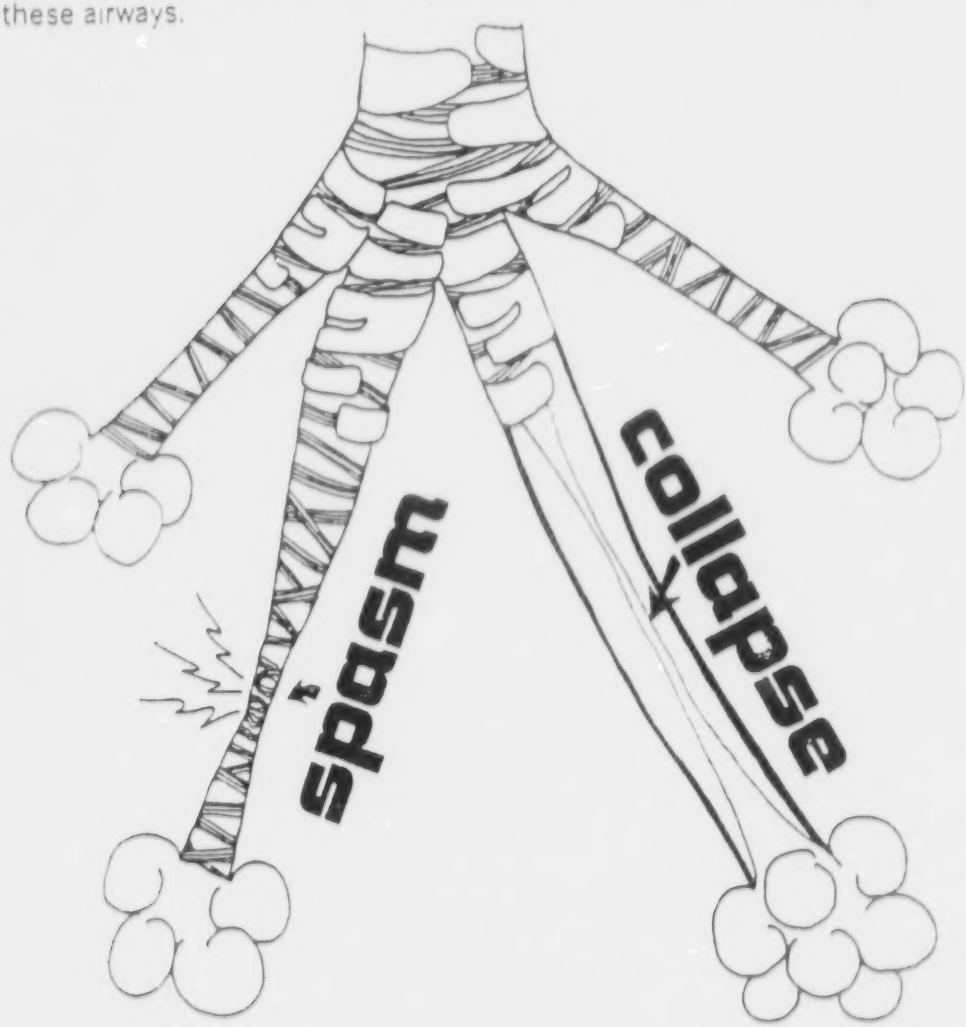
ASTHMA

Asthma is a disease of the bronchial tubes or airways. Symptoms are chest tightness, shortness of breath, wheezing and coughing. These symptoms come and go and are caused when muscle spasms close down bronchial tubes or there is swelling of the lining of these airways.



In many people, asthma is triggered by specific allergies such as pollens, molds, ragweed, trees or grasses. Asthma is not often caused by food allergies in adults even when skin tests to foods are positive.

In some people, the bronchial tubes become small and swollen because of nervousness, cold or hot air, high humidity and exercise. Both allergic and other types of asthma are passed through families.

Bronchodilator drugs are always used in the treatment of asthma. They relax the muscles in the airways making it easier to breathe.

SMOKING AND YOUR BODY

The following are changes your body goes through when you quit smoking:

Within 20 minutes of the last cigarette:

- Blood pressure drops to normal
- Pulse rate drops to normal rate
- Body temperature of hands and feet increase to normal

8 hours:

- Carbon monoxide level in blood drops to normal
- Oxygen level in blood increases to normal

24 hours:

- Chances of heart attack decrease

48 hours:

- Nerve endings start re-growing
- Ability to smell and to taste things enhances

72 hours:

- Bronchial tubes relax, making breathing easier
- Lung capacity increases

2 weeks to 3 months:

- Circulation improves
- Lung function increases up to 30 percent
- Walking becomes easier

1 to 9 months:

- Coughing, sinus congestion, fatigue, and shortness of breath decreases
- Body's overall energy level increases
- Cilia regrow in lungs, increasing ability to handle mucus, clean the lungs. reduce infection

Grade 5

LEVEL: PRIMARY

HARD TO RESIST

OBJECTIVE:

To teach students that just because a product comes in a nice package does not make it healthy and beneficial to use.

LIFE SKILL:

Awareness of choices.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

One nicely wrapped package containing garbage; one plain wrapped package containing a nice prize. Handout "Advertising Techniques" (see Grade 5 Handout Masters).

INFORMATION:

Students will recognize the eight advertising techniques upon completion of this exercise. Tobacco companies spend billions of dollars to recruit 3,000 youth to smoke each day. Their techniques are very effective and have a powerful impact on young people.

INSTRUCTIONS:

Introduce the section with a discussion of the two packages. Discuss what the contents might be in each of the different packages. Have students open the two different packages. Discuss that many products are packaged in ways that attract us. Next, review advertising techniques. Review the handout and list, discuss or display examples of each. Have the students build a billboard, using the handout that will persuade people not to use tobacco products. Use at least two different advertising techniques. Review that resistance to media persuasion is a very important skill to gain. We're bombarded daily with ads that are trying to entice us to buy a particular product. Many times, as with the case of cigarettes and chewing tobacco, these products are harmful and may be marketed as safe or fun to use.

RESOURCES:

Tooele County Health Department, Utah, 1993.

ADVERTISING TECHNIQUES

Testimonial

An important person may testify that he/she has used a product. The buyer thinks, "If that person uses it, it must be good." The person may actually know nothing about the quality of the product.

Sense Appeal

Pictures or sounds are used to appeal to the senses. The buyer begins to "taste" and is motivated to buy.

Transfer

A good-looking, sociable, sexy or well-dressed man or woman may sell the product. The buyer associates the product with someone good-looking or admirable and imagines that by using the product he/she will become like that person.

Plainfolks

An ad may show an average person recommending the product, so the average buyer identifies with that person, takes the advice, and buys the product.

Romance Fantasy

White knights, green giants, skilled super athletes may be featured in a commercial. Unreal features and powers are attributed to the product but the buyer associates these powers with the product anyway.

Humor

People tend to remember or at least have a positive association with an ad that makes them laugh; when they remember the ad, they think of buying the product.

Statistics

Buyers tend to be impressed by statistics. Ads may leave out information such as who conducted the study or what kind of people were polled.

Cardstacking

Ads may give one-sided portrayals of their products. Only the beneficial aspects are mentioned, not the weaknesses.

Grade 6

LEVEL: *INTERMEDIATE*

LEVELS OF PEER PRESSURE

OBJECTIVE:

To acknowledge peer pressure in relation to smoking.

LIFE SKILLS:

To promote good mental health, including family and community health, as part of a healthy lifestyle; to promote disease prevention as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

Blackboard or overhead, examples of peer pressure.

INFORMATION:

There are three levels of peer pressure:

1. low—a simple, friendly offer of a cigarette (for example, "Have a smoke?" or "Like a cigarette?").

2. medium—more pressure that may include teasing and coaxing (for example, "Are you chicken?" or "Scared to try it?").

3. high—heavy pressure includes put downs and may escalate to threats (for example, "I thought you were my friend" or "Come on, I said just do it!").

CLASS ARRANGEMENT:

Circle of students.

INSTRUCTIONAL STRATEGIES:

1. Ask students what they think peer pressure is. Elicit responses.

2. Review the three levels of peer pressure with the students, using the blackboard or overhead.

3. Read examples (see list below) of peer pressure to class. The class is to determine whether the examples are of low, medium, or high peer pressure.

4. Ask the students in which of the examples would saying "no" be the easiest thing to do? Most difficult to do?

Evaluation/Modification:

Teach levels on a continuum from low to high. Ask students how they would respond to the example situations. Role playing their responses to each example can also be done.

Resources:

Michigan Model for Comprehensive School Health Curriculum, 1986.

Peer Pressure Situation Examples. The student is to determine whether the situation is low, medium or high peer pressure.

1. You are with a friend. Your older brother or sister walks up to you and says "Want a cigarette?"

   __LOW __MEDIUM __HIGH

2. You are walking across the school grounds. Three students you know approach you and offer you a cigarette. You say "No, thanks." They say, "What's the matter? You chicken?"

   __LOW __MEDIUM __HIGH

3. You are in the school bathroom. Another student says "Here, have a cigarette." You say "No." They say "You can't be in this john unless you smoke, everybody's smoking."

   __LOW __MEDIUM __HIGH

4. You are at a basketball game. Another student offers you a cigarette and says "Want a smoke?"

   __LOW __MEDIUM __HIGH

5. You are at school talking with a friend. Two other students walk up and say "We're going to step outside for a smoke. Want to join us?"

   __LOW __MEDIUM __HIGH

Grade 6

LEVEL: *Intermediate*

To Smoke or Not to Smoke

Objective:

To compare students' perceptions of tobacco prevalence rates and to identify reasons why people choose/not choose to smoke.

Life Skills:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as parts of a healthy lifestyle.

Teaching Facility:

Classroom.

Equipment/Materials:

"To Smoke or Not to Smoke" (see Grade 6 Handout Masters; one per student), lined paper, envelopes.

Information:

Everyone has a personal bias concerning who smokes, who doesn't smoke, why people smoke and who actually smokes. This exercise will help clarify students' perceptions and provide information concerning the population that smokes.

Instructional Strategies:

Ask the students if they know anyone in junior high school who smokes. Inform them that they are going to perform an activity that will allow them to see what extent they believe tobacco is used in junior high. Have all students stand. Then state, "All those who believe that more than 10 percent of those in junior high school smoke may remain standing. All others sit down." Repeat for 20 percent, 30 percent, etc., until all are sitting. Inform the students that one way to get an accurate measure of the real smoking rates is to perform a survey. Have each student write a brief cover letter of what he/she is attempting to find and attach it to the Tobacco Survey. Have students place the cover letter and survey in an envelope. Contact a junior high school teacher, inform him/her of your class activity and solicit their assistance in having their junior high school students respond to the surveys. Distribute a copy of the completed surveys to each member of the class and as a class discuss the responses received. In particular, discuss the prevalence rates and

compare the results to the class perceptions. Also discuss the reasons that junior high school students chose to smoke or not to smoke. Discuss how incorrect perceptions can cause us to make decisions that we otherwise would not have made.

RESOURCES:

Davis County Health Department, Utah, 1993.

SURVEY: TO SMOKE OR NOT TO SMOKE

Age:___ Male:___ Female:___

Have you ever smoked? No____ Yes____

Do you smoke now? No____ Yes____

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1. Answer one of the following:

   a. If you are a non-smoker, why do you choose not to smoke?

   b. If you are current smoker, why do you choose to smoke?

2. How many of your friends are smokers?
   Most___ About Half___ Only a few___ None___

3. Do your parents smoke?
   Yes___ No___

4. Has anyone ever tried to persuade you to smoke?
   Yes___ No___

5. What did you say to them?

6. What do you do when you are:
   tense?_____
   angry?_____
   tired?_____
   for fun?_____

7. What physical exercises do you do to stay fit?

Grade 6

LEVEL: *INTERMEDIATE*

MY HEALTH SURVEY

OBJECTIVE:

To expose the student to a personal health survey.

LIFE SKILL:

To promote personal safety, proper nutrition, physical activity, good mental health and disease prevention as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

One Personal Health Survey for each student (see Grade 6 Handout Masters).

INFORMATION:

Health-Risk Appraisals (HRAs) are becoming more and more popular as a tool for measuring an individual's awareness of his/her personal health habits. HRAs also give each person ideas on how to adopt a healthier lifestyle.

CLASS ARRANGEMENT:

Individual student assessments and class discussion.

SKILLS NEEDED:

Reading, writing.

INSTRUCTIONAL STRATEGIES:

1. Give each student a personal health survey. Each student is to mark an "X" on the line preceding each statement if the statement is true most of the time.

2. Subtotal each section. Add the subtotals for a total score (use the bottom right-hand section of the survey sheet to add the total score).

3. As a class, discuss the implication for each of the statements.

Evaluation/Modification:

It would be fun and interesting to give the students this personal health survey twice (for example, at the beginning of the year and again before school is out). The results can be used to encourage personal health behavior changes over time.

Resources:

Nebraska Department of Education, Comprehensive Health Education Curriculum Guide, 1993.

Personal Health Survey

Name_____

Place an "X" on the line before each statement which is true for you most of the time. Total each section and then copy the subtotals into the boxes at the end of the survey. Add up your total score.

Work, Relaxation, Sleep

___ 1. I usually enjoy school and school work.
___ 2. I usually have the energy left to play after school.
___ 3. I fall asleep easily at bedtime.
___ 4. I usually sleep all night without waking up.
___ 5. If awakened, I can usually go back to sleep again.
___ 6. I don't bite or pick at my nails.
___ 7. Even when I have a problem, I can forget it for a little while and enjoy myself.
___ 8. I often spend some time each day thinking quietly about myself and my life.
___ 9. I use a way to calm down when I am in a stressful situation.
___ 10. I spend time developing skills or doing creative things.

___ **Subtotal**

Personal Care and Home Safety

___ 11. I do things that protect my home and school from fire.
___ 12. I use a seatbelt when I am in a car.
___ 13. I know how to use a fire extinguisher.
___ 14. I do things that protect my home and school from safety hazards.
___ 15. I use dental floss and a soft toothbrush every day.
___ 16. I don't smoke.
___ 17. I try not to be in closed places where people are smoking.
___ 18. I know that my immunizations are up to date.
___ 19. I do not play in the street.
___ 20. I stay away from sprays, chemical fumes or car exhaust fumes.
___ 21. I stay away from very noisy areas or wear ear plugs.
___ 22. I am aware of changes in my physical and mental health and bring anything unusual to the attention of an adult.

___ **Subtotal**

Nutrition Awareness

___ 23. I eat at least one uncooked fruit or vegetable each day.
___ 24. I only take medicine given to my by an adult.
___ 25. I drink fewer than five soft drinks a week.
___ 26. I usually don't eat foods with lots of sugar.
___ 27. I seldom add salt to my food.
___ 28. I often read the labels to find out the ingredients of the foods I eat.
___ 29. I eat whole wheat bread or bran cereal several times a week.
___ 30. I don't drink coffee or tea.
___ 31. I have a good appetite.
___ 32. My weight is within the normal range for my age and height.

___ **Subtotal**

Physical Activity

___ 33. I walk or ride a bike almost every day.
___ 34. I get hard physical exercise at least three times a week.
___ 35. I do stretching/limbering up exercises at least twice a week.

___ **Subtotal**

Feelings/Decision Making

___ 36. I am usually happy.
___ 37. When something negative happens, I do not blame others but try to find a solution.
___ 38. I do not try to hide my being upset, angry or sad but instead find acceptable ways to show these feelings.
___ 39. I am able to say "no" to my friends without feeling guilty or afraid that they won't like me anymore.
___ 40. It is easy for me to laugh.
___ 41. I think about what might happen before I do something.
___ 42. I listen and think about criticism rather than just getting upset.
___ 43. I feel okay about crying when I am upset and sad, and allow myself to do so.
___ 44. It is easy for me to talk things over with other people.
___ 45. I would ask for help if I had a problem I couldn't solve myself.
___ 46. I can think of a lot of different ways to solve a problem.
___ 47. At times I like to be alone.
___ 48. I like myself.

___ **Subtotal**

Involvement with Others

___ 49. I make an effort to know my neighbors and get along with them.
___ 50. I am a member of one or more community groups (Boy Scouts, Girl Scouts, little league, church group).
___ 51. I often meet new people whom I would like to get to know better.
___ 52. I have at least two close friends.
___ 53. I find it easy to show love and concern for those I care about.
___ 54. I try to understand what other people are feeling.

___ **Subtotal**

Maximum Score	Your Section Score	
10	____	Work, Relaxation, Sleep
12	____	Personal Care and Home Safety
10	____	Nutrition Awareness
3	____	Physical Activity
13	____	Feelings/Decision Making
6	____	Involvement with Others
54	____	**TOTAL**

TOBACCO USE PREVENTION

Grades 7-12

Lesson plans and materials that are specific to Tobacco Use Prevention, taken from the Montana Model Curriculum for Health Enhancement

Grade 7

LEVEL: SECONDARY

ASSERTIVENESS AND TOBACCO

OBJECTIVE:

To learn skills of being assertive through role playing.

LIFE SKILL:

To discourage the use of alcohol, tobacco and other drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

"Pass-Up Contracts" (see Grade 7 Handout Masters).

INFORMATION:

This activity consists of teaching students to be assertive with people other than their peers. Being assertive means understanding that you have rights, but one also has the responsibility to respect the rights of others.

When young people are dealing with family and friends who use harmful substances like tobacco, they need to be informed that: (a) they should focus on how they feel about a family member or friend using a substance (e.g., "I'm worried about you, Mom, and I don't want you to get sick") rather than demand, accuse or pressure someone; and (b) they have the right to ask someone not to smoke or drink, but that each person has the right to decide for himself or herself.

CLASS ARRANGEMENT:

Small group.

INSTRUCTIONAL STRATEGIES:

After the introduction and clarification of what is meant by being assertive, give the class the following situation: One of your parents has been smoking for as long as you can remember and has been sick much of the past year. Your parent coughs and the doctor has told him/her to quit smoking. You are going to approach your parent because you are concerned about his/her health.

Ask the class to suggest ways to assertively approach a parent. Remind the class that being assertive means that you have rights, but also the responsibility to respect the rights of others.

Divide the class into teams. After a few ideas are presented by students, ask if members of a team would like to demonstrate their ideas on how to be assertive. (Note: Role playing should be kept brief.)

Ask the class to suggest ways to be assertive in the following situations:

a. Someone is smoking in a crowded elevator. How could you assertively ask them to stop smoking?
b. You are out on a date and on the way to a movie your date decides to open a can of chewing tobacco and is ready to put a pinch in his/her mouth. How could you assertively ask him/her not to do this?
c. You saw a friend buying cigarettes and giving them to some young kids. How do you assertively handle this situation?

At the end of the lesson, ask students to complete a "Pass-Up Contract" as homework. The contract addresses how the student will react in three drug-related situations and asks the student to state his or her intentions regarding future tobacco use.

RESOURCE:

Adapted from Pass-Up, Session 9: "Being Assertive With Others," pp. 87-93, American Lung Association of Montana.

PASS-UP → CONTRACT

My name is _____, and these are some of the decisions I have made:

If a friend offers me a cigarette, I will _____

If a good friend gives me a lot of pressure to use chewing tobacco, I will _____

In deciding whether or not to use tobacco in the future, I have decided: _____

I'M TOBACCO FREE!!!

x _____
Student Signature

_____
Date

Adapted with permission from: Pass-Up, Session 9: "Being Assertive With Others," pp. 87-93, American Lung Association of Montana

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Grade 7

LEVEL: SECONDARY

LONG-TERM EFFECTS OF TOBACCO ON THE BODY

OBJECTIVE:

To help students understand the health consequences of using tobacco.

LIFE SKILL:

To discourage the use of alcohol, tobacco and other drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

"Chemicals in Cigarettes and . . ." handout (see Grade 7 Handout Masters).

INFORMATION:

Tobacco is made from numerous chemicals. This exercise can help students make the association between tobacco and negative health effects.

CLASS ARRANGEMENT:

Individual or small group.

INSTRUCTIONAL STRATEGIES:

1. Provide students with a list of chemicals found in tobacco and ask them to identify other uses for the chemicals. The following is a partial list:

   Acetone (used in nail polish remover)
   Methanol (used as antifreeze in cars)
   Nicotine (used as an insecticide)
   Cyanide (used as a poison)
   Ammonia (used to clean windows and bathrooms)
   Formaldehyde (used to preserve human tissue)
   Carbon Monoxide (found in car exhaust)
   Acetylene (fuel used in torches)

2. Have students discuss the consequences of putting these chemicals into the body. Have them discuss possible reasons why the tobacco industry continues to sell tobacco although tobacco products are harmful to humans.

3. Ask students to complete the matching exercise in the "Chemicals in Cigarettes and. . ." handout.

   ANSWERS: C=1; E=2; H=3; G=4; D=5; F=6; B=7; and A=8.

RESOURCE:

California Department of Education - Healthy Kids Tobacco-Free Training.

Chemicals in Cigarettes and . . .

Directions: Write the letter of the correct common use next to the name of each chemical found in cigarettes.

Chemicals in Cigarettes	Common Uses
_____ 1. Acetone ('As-e-tone)	A. fuel used in torches
_____ 2. Methanol ('meth-e-nall)	B. found in car exhaust
_____ 3. Nicotine ('nik-e-tene)	C. used in nail polish remover
_____ 4. Cyanide ('si-a-nide)	D. used to clean windows and bathrooms
_____ 5. Ammonia (a-'mo-nya)	E. used as antifreeze in cars
_____ 6. Formaldehyde (for-'mal-de-hide)	F. used to preserve human tissue
_____ 7. Carbon monoxide ('kar-bon ma'-nok-side)	G. used as poison
_____ 8. Acetylene (a-'set-al-ene)	H. used as an insecticide

Grade 8

LEVEL: SECONDARY

ADVERTISERS CAN'T FOOL ME!

OBJECTIVE:

To identify four cigarette advertising strategies.

LIFE SKILLS:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as parts of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

Examples of cigarette advertisement strategies (see Grade 8 Handout Masters); large stack of magazines which have tobacco advertisements in them.

INFORMATION:

Congress passed a law in 1971 that prohibits the advertising of cigarettes on television. Cigarette ads are permitted in magazines and newspapers, on billboards and sides of buses, and as posters in trains and airports. Cigarette ads must contain a warning from the Surgeon General. Ads must identify the amount of tar and nicotine in cigarettes.

CLASS ARRANGEMENT:

Class discussion, then individual problem solving.

SKILLS NEEDED:

Health hazards of smoking; awareness of pressures to experiment with cigarettes (pressure from peers, adults, and media).

INSTRUCTIONAL STRATEGIES:

1. Today you are going to learn about "media rip off" and how advertisers want to make people think "everybody" is smoking.

2. Display/show advertisement examples. Ask the questions:

   a. What do the cigarette ads show people doing? How do the people look? (People are rich, attractive, having fun, happy, neat and clean.)

   b. What do the ads not show that we have already learned about cigarette smoking?

   c. Can you find the Surgeon General's warning on the ad? What does it say? Why do you suppose that warning is there?

   d. What is the purpose of advertising?

3. Introduce the concept of being "fooled" by advertisements. Ask: What do advertisers do to make people want to buy their brand or product?

4. State the idea that advertisers use special tricks to pressure people. An ad goes to the back of a person's mind—the hidden message fools us! Ask: What can you do to avoid being fooled by ads?

5. Put up the overhead "Strategies Used by Cigarette Manufacturers in Advertisements." Explain each of the four strategies by displaying and analyzing advertisement examples you have cut out. As you show each advertisement, go through the strategy questions as discussion.

6. Have each student find a magazine advertisement for a tobacco product. Working individually or in pairs, have the students find which of the four advertising strategies they have learned are being used in the ad. Have them also answer the questions:

   a. What do you think the advertiser wants you to believe from this ad? (What is the hidden message?)

   b. How can you change the ad to make fun of it or change it into an antismoking advertisement? (Change the wording, picture(s), etc.)

7. Make a bulletin board displaying the advertisements (with strategies identified on index cards).

Evaluation/Modification:

This activity can be modified for any grade level 7-12. The students can be assigned to bring an advertisement from home.

Resources:

Michigan Model, 1986.

Strategies Used by Cigarette Manufacturers in Advertisements

Strategy #1: People Pressure or Use of Role Models

- What kinds of people are shown in the ads? (young, attractive, healthy, etc.)
- What kinds of people are not shown?
- Why don't the ads use many "older" people?
- Why do professional athletes refuse to endorse tobacco products? Can athletes "afford" to smoke cigarettes? Why or why not?

Strategy #2: Appeal to Relaxation and Mood

- What mood do the people in the ad seem to be in? (happy, having fun)
- Do the people look relaxed? How can you tell?
- What have we learned about how cigarettes affect our bodies? Do they really relax you?
- Do the cigarette manufacturers want us to think that cigarette smoking is relaxing?

Strategy #3: Cigarettes Have a Good Taste and Are Enjoyable

- The first cigarettes are not enjoyable according to studies!
- What is clean and enjoyable about hot smoke being inhaled?
- The image in the ad is clean and cool fun. What do we know is behind that image? (clothing, hair, air)
- How enjoyable is cigarette smoke for nonsmokers who might be nearby?

Strategy #4: The Numbers Game

- Can you find in the ad where the advertiser gives low tar figures? Why do you think the advertiser doesn't list all of the chemical substances that are left in a smoker's lungs?
- What is the low tar number supposed to make us think? (safer?)
- Why don't they list the diseases that are related to cigarette smoking? (cancer, heart disease, bronchitis, emphysema, asthma)
- Where is the warning label placed? How large is it? Where do you think it should be placed?

Grade **8**

LEVEL: *SECONDARY*

DECISION-MAKING SKILLS

OBJECTIVE:

To recognize that decisions are an everyday part of life. This lesson is Part 1 of a two-part exercise on the decision to use tobacco.

LIFE SKILL:

To discourage the use of alcohol, tobacco and other drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

"Decision-Making Steps" handout and "Decisions/Decisions" work sheet (see Grade 8 Handout Masters); chalk and chalkboard.

INFORMATION:

This exercise will help students understand that for every decision there is a choice. This lesson should be used prior to teaching Part 2, which is a discussion about making the choice to use tobacco products (see Grade 8 lesson plan "Understanding Choices").

CLASS ARRANGEMENT:

Individuals or small groups.

INSTRUCTIONAL STRATEGIES:

The instructor should discuss several key terms with the class. Those terms are: **Decision**—a choice, the act of making a choice or finding a solution to a problem; **Self-concept**—how people feel about themselves; and **Stress**—the body's physical and mental reactions to demanding situations.

1. Define **DECISION** on the board. List the decisions that we make every day: going to school, doing homework, obeying school and home rules, obeying laws, etc. Discuss the consequences of those decisions. Review the Decision-Making Steps handout. Have students think about decisions they have made recently. Did it make them feel happy, sad or disappointed? Ask students to list consequences of a good or bad decision they made. Discuss who was affected by their decisions.

2. Discuss self-concept. People sometimes make decisions based upon how they feel about themselves.

3. Discuss stress and how the body reacts to unhealthy decisions; to changes in eating habits; to loss of appetite; to chewing tobacco or smoking tobacco to relieve stress.

4. Have students do the Decisions/Decisions handout.

RESOURCES:

Adapted from Utah Department of Health.

DECISION-MAKING STEPS

1. What is it that needs to be decided?

2. What do you need to know about the situation in order to decide?

3. What are all of your choices?

4. What are the positive and negative consequences of each of those choices?

5. Talk about it with others.

6. Make the decision—take action!

7. Evaluate—was this a good choice?

"Decisions - Decisions" Worksheet

John has used chewing tobacco for about a year. He thought that it was safe. After all, many professional athletes use it. Now his mouth is sore. His girlfriend is upset because of his breath. He has learned that smokeless tobacco can cause mouth cancer and that it has negatively affected his athletic performance.

Michelle thinks chewing tobacco is gross. Josh, the captain of the baseball team chews and has asked her to go to the school dance.

You are a cashier in a neighborhood grocery store. A classmate (age 16) comes in to buy a pack of cigarettes.

It's Friday night and you invited some friends over for pizza and videos. Halfway through the movie one friend pulls out a can of snuff.

Grade 8

LEVEL: SECONDARY

UNDERSTANDING CHOICES

OBJECTIVE:

To investigate and discuss other people's choice to use tobacco products, and to evaluate one's own personal choices. (This lesson is a follow-up to the Grade 8 lesson "Decision-Making Skills").

LIFE SKILL:

To discourage the use of alcohol, tobacco and other drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

A copy of Youth Access to Tobacco Products Control Act of Montana (see Appendix C); "Cigarette Chemicals" handout; and "Tobacco Use Interview" sheet (see Grade 8 Handout Masters.. (NOTE: You should review your school's policy on surveys of students before you give this interview sheet to any students.)

INFORMATION:

Smoking and chewing are addictive habits. As a follow-up to the discussion about personal decisions, this lesson will help students understand why people begin to use tobacco. They will also have a clear understanding of Montana's Youth Access to Tobacco Products Control Act, which prohibits the sale of tobacco to persons under the age of 18. It will be important to reinforce that although an individual may choose to use tobacco, the person is not a bad person because of that choice. Actually, the person using tobacco may not be aware of the dangers of tobacco.

CLASS ARRANGEMENT:

Individuals or small groups.

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Instructional Strategies:

Review the decision-making skills that were discussed in the Grade 8 lesson "Decision-Making Skills." Use the Cigarette Chemicals handout to reinforce to students that chemicals found in tobacco products are very hazardous and that using tobacco can easily become a lifetime addiction. Not only are tobacco products dangerous, it is against the law to sell tobacco products to persons who are under age 18.

Hand out the Youth Access to Tobacco Products Control Act of Montana and explain it. Reinforce to students that when it comes to tobacco, the best choice is not to start at all.

Evaluation/Modification:

Provide copies of the Tobacco Use Interview sheets to the students. (NOTE: You should review your school's policy on surveys of students before you give this interview sheet to any students.) Have the students interview up to three people who have quit or who are regular users of tobacco products. Interviews do not necessarily need to be done with fellow students, but could be done with other individuals who the students know use tobacco. Give students a week to conduct interviews. Discuss results of the interviews during a subsequent class.

Resources:

Adapted from Health Department, Southeastern Utah.

CIGARETTE CHEMICALS

TAR is the common name for a mixture of substances that is produced as the tobacco burns.

- Has been found to cause or promote lung cancer.
- A sticky brown residue with hundreds of chemicals which includes several carcinogens (cancer causing substances).
- Benzopyrene one of the deadliest carcinogens known is found in cigarette tar.
- A pack a day smoker inhales 1/2 cup (4 oz.) of tar a year.

NICOTINE is an oily compound which can kill instantly in pure form.

- An injection of one drop (70 mg.) will kill an average size man within a few minutes. Most cigarettes, however, contain somewhere between .2 mg. and 2.2 mg.
- A poisonous drug found in tobacco (used as an insecticide).
- Acts as a stimulant causing your heart to bean 10-20 beats more per minute and your blood pressure to go up.
- Makes your blood vessels constrict which causes the temperature to lower in toes and fingers.
- For most smokers, nicotine is psychologically and physiologically addictive with tolerance and withdrawal problems.

CARBON MONOXIDE is another deadly poison found in cigarette smoke.

- The most dangerous gas in a cigarette (also found in car exhaust).
- Decreases the ability of the blood to furnish the body with the necessary amount of oxygen.
- Produces shortness of breath.

TOBACCO USE INTERVIEW

1. How old were you when you first used a tobacco product? _____

2. What type and what brand was it? _____

3. Why did you start? _____

4. How long did you use or are you currently a regular user? _____

5. How much did or do you use? _____

6. Have you tried to quit before? If so, how many times? Were you successful? If not, why did you start again? _____

7. If you had it to do over would you use tobacco? Why or why not? _____

8. Did you know there is a law that prohibits the sale of tobacco to minors? _____

9. Where do you buy tobacco products? _____

Grade 8

LEVEL: SECONDARY

IT'S AN ILLUSION

OBJECTIVE:

To make students aware that the dangers of tobacco use are diminished by the ability of the tobacco industry to create illusions in their ads.

LIFE SKILL:

To discourage the use of alcohol, tobacco and other drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

The World's Best "Illusion" Puzzle handout; tobacco ads from magazines.

INFORMATION:

This exercise will make students recognize the illusion the tobacco industry creates via their advertising. Students will write slogans to contradict the ads and reduce the effectiveness of the ads.

CLASS ARRANGEMENT:

Large or small groups.

INSTRUCTIONAL STRATEGIES:

1. Have the students list the purposes of advertising. The list could include: to promote a product, to increase demand for a product, etc.

2. Discuss illusion with students. Illusion is the act of deceiving or the state of being intellectually misled. Distribute the "Illusion" handout. Show the students that an illusion is intended to be misleading.

3. Have the students list five characteristics of tobacco ads. The list could include that the ads are colorful, attractive, get attention, and present a message.

4. Name some messages that cigarette ads present about tobacco. What fact about tobacco contradicts the message in the ad? For example:

   An ad claims that cigarettes are ultra light. Fact: Cigarettes contain chemicals that can create physical and psychological dependency.

An ad claims that a cigarette is low in tar. Fact: The cigarette does not have less tar than other cigarettes, it has less tobacco than other cigarettes (less tobacco means less tar).

An ad claims that a cigarette is low in nicotine. Fact: The cigarette does not have less nicotine than other cigarettes, it has less tobacco than other cigarettes (less tobacco means less nicotine).

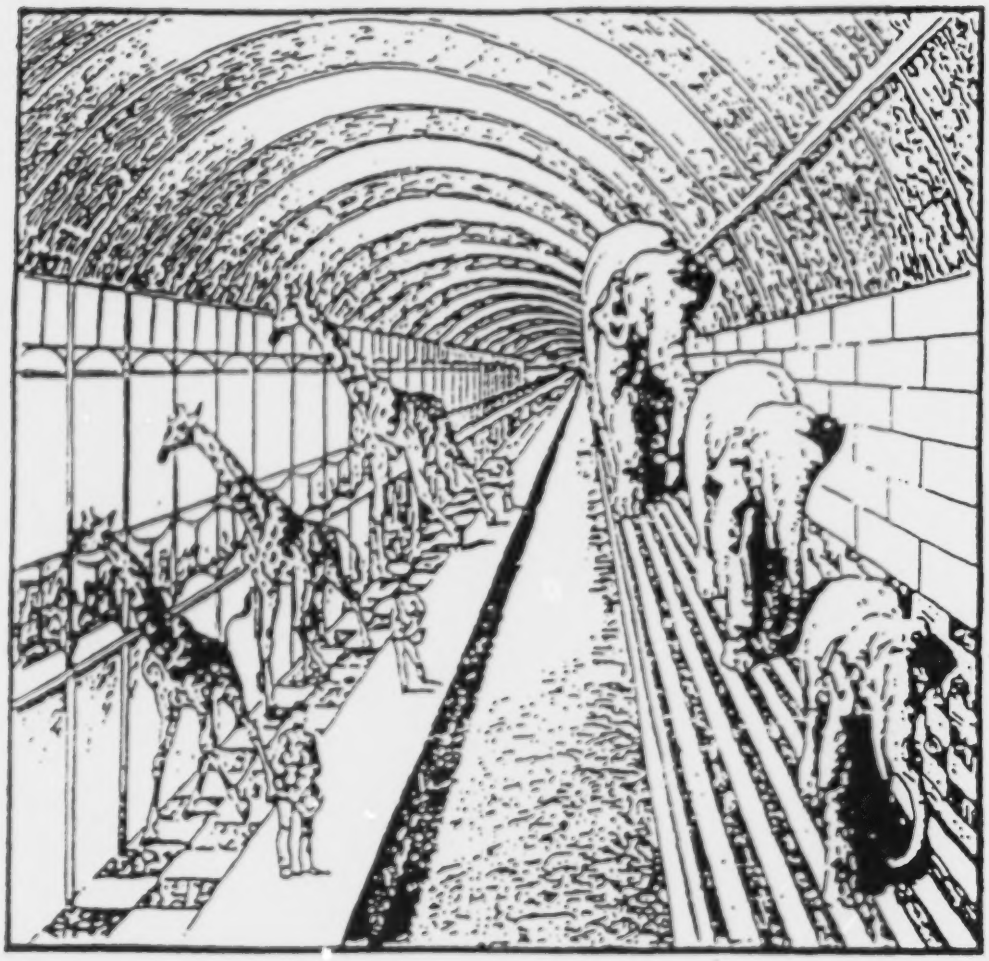
An ad claims that a cigarette is flavorful and has a smooth taste. Fact: Cigarettes are addictive and have strong withdrawal side effects.

5. Have students write a slogan or create art work that contradicts or mocks a tobacco advertisement.

RESOURCES:

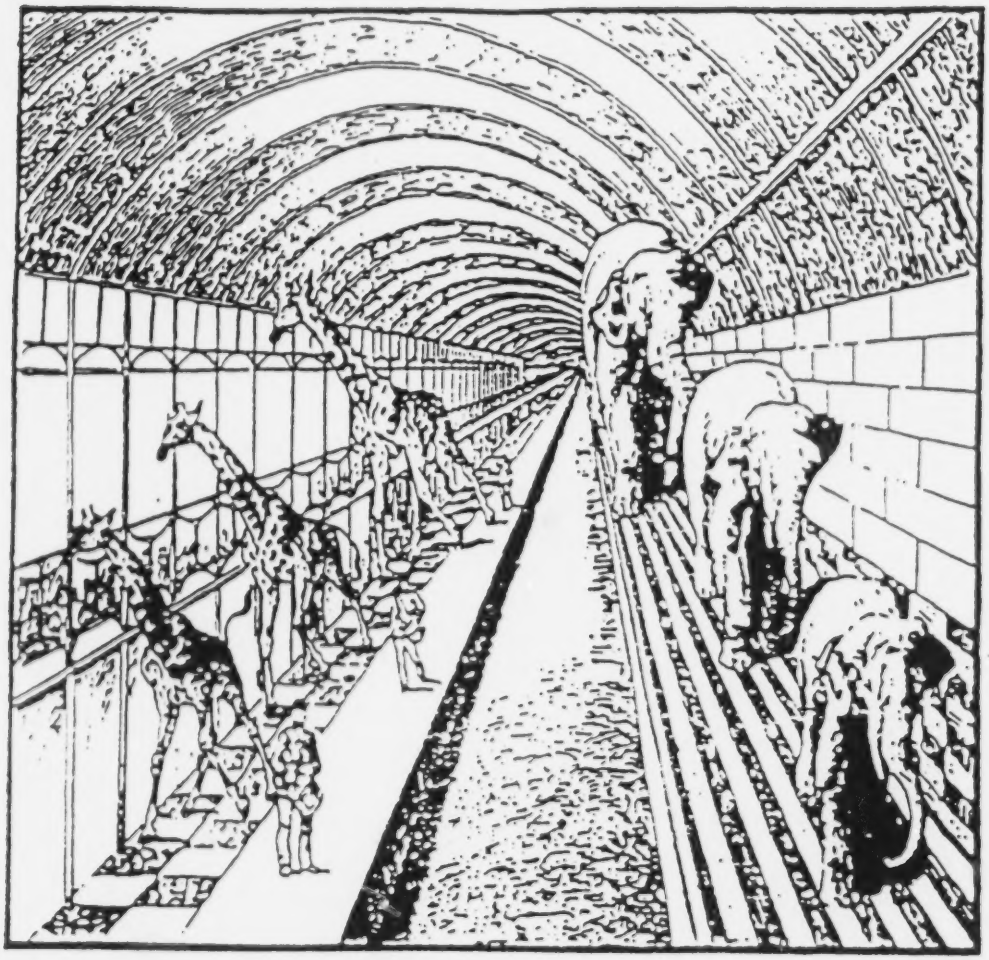
Adapted from Utah County Health Department.

The World's Best "Illusion" Puzzle



This is an outstanding optical illusion which appeared in a 1905 issue of *St. Nicholas* magazine. The article that came with it asks the reader to point out which of the three elephants and which of the three giraffes traveling through the corridor in the picture is the tallest? Do you know the answer?

The World's Best "Illusion" Puzzle



"Illusion" Puzzle

Surprising as it may seem, you will find that by carefully measuring the heights of the animals, the nearest ones are really either taller than those that follow or equal in size. The reason that the latter look so much larger than they really are is that they do not grow smaller in proportion to their surroundings as does everything else.

Table 1-6
Model for Using Resistance Skills

1. **Use assertive behavior.**
   There is a saying, "You get treated the way you 'train' others to treat you." Assertive behavior is the honest expression of thoughts and feelings without experiencing anxiety or threatening others. When you use assertive behavior, you show that you are in control of yourself and the situation. You say NO clearly and firmly. As you speak, you look directly at the person(s) pressuring you. Aggressive behavior is the use of words and/or actions that tend to communicate disrespect. This behavior only antagonizes others. Passive behavior is the holding back of ideas, opinions, and feelings. Holding back may result in harm to you, others, or the environment.
2. **Avoid saying "NO, thank you."**
   There is never a need to thank a person who pressures you into doing something that might be harmful, unsafe, illegal, or disrespectful or which may result in disobeying parents or displaying a lack of character and moral values.
3. **Use nonverbal behavior that matches verbal behavior.**
   Nonverbal behavior is the use of body language or actions rather than words to express feelings, ideas, and opinions. Your verbal NO should not be confused by misleading actions. For example, if you say NO to cigarette smoking, do not pretend to take a puff of a cigarette in order to resist pressure.
4. **Influence others to choose responsible behavior.**
   When a situation poses immediate danger, remove yourself. If no immediate danger is present, try to turn the situation into a positive one. Suggest alternative, responsible ways to behave. Being a positive role model helps you feel good about yourself and helps gain the respect of others.
5. **Avoid being in situations in which there will be pressure to make harmful decisions.**
   There is no reason to put yourself into situations in which you will be pressured or tempted to make unwise decisions. Think ahead.
6. **Avoid being with persons who choose harmful actions.**
   Your reputation is the impression that others have of you, your decisions, and your actions. Associate with persons known for their good qualities and character in order to avoid being misjudged.
7. **Report pressure to engage in illegal behavior to appropriate authorities.**
   You have a responsibility to protect others and to protect the laws of your community. Demonstrate good character and moral values.

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Grade 9

LEVEL: SECONDARY

DRUGS AND CRIME

OBJECTIVE:

To analyze the effects of tobacco, alcohol, and other drug use on crime rates and the economy.

LIFE SKILL:

To promote good mental and environmental health practices within families and communities as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

"Drugs and Crime" handout (see Grade 9 Handout Masters).

INFORMATION:

Drug use costs the U.S. billions of dollars each year. Much of this money is spent on law enforcement, rehabilitation, and prevention education. A portion of taxes that each student's parents pay goes to support fighting the drug war (military, police, prisons, hospitals) and preventing drug use (schools, social service, research).

CLASS ARRANGEMENT:

Class discussion, individual problem solving.

SKILLS NEEDED:

Math skills (addition, multiplication, division).

INSTRUCTIONAL STRATEGIES:

1. Use background information to start a discussion. Add the following:

   a. How do the students feel about their families having to pay for the effects of drug use?

   b. How else could this money be used? (youth programs, educational loans, research, etc.)

c. How else could the U.S. get money to deal with the drug problem?

d. How would students solve the drug problem?

2. Each student should complete the "Drugs and Crime" worksheet.

3. Correct and discuss the responses on the worksheet.

Answer Key

1. 486,000 people
2. 6,000 suicides
3. $150, $1,050
4. 3,500,000 arrests
   7,500,000 arrests
5. 17,000 accidents
6. $98 billion

Evaluation/Modification:

This activity can be used in a mathematics or health enhancement teaching environment.

Resource:

Nebraska Comprehensive Health Education Curriculum Guide, 1993.

Drugs and Crime

1. Fifty-four percent of people convicted of violent crimes had used alcohol before committing the offense. If 900,000 people were arrested for violent crimes, how many had used alcohol before they were arrested?

2. Thirty percent of all suicides are at least partly attributed to alcohol. If 20,000 people commit suicide, how many of these suicides were directly or indirectly caused by alcohol use?

3. Heroin addicts may have to steal items worth three times the cost of a daily drug habit (because they get so little for reselling stolen goods). If a person has a $50-a-day heroin habit, how much would he have to steal in one day to cover his addiction? How much for one week?

4. Each year, there are some 500,000 drug-related arrests. At that rate, how many total drug-related arrests will we have in 7 years? 15 years?

5. Half (50%) of all motor vehicle fatalities are attributed to alcohol use. if there are 34,000 motor vehicle fatalities in one year, how many can be attributed to alcohol?

6. Approximately $8 billion are spent on drug enforcement every year in the United States. Drug users spend $90 billion a year to purchase illegal drugs. If no one purchased illegal drugs for one year and no money was needed for drug enforcement that year, how much money could be used for healthier purposes?

Grade 9

LEVEL: SECONDARY

WHY I SMOKE AND NICOTINE ADDICTION

OBJECTIVE:

To understand why people start using tobacco.

LIFE SKILL:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as parts of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

"Test Yourself: What Kind of Tobacco User Are You?" handout, "Scoring the Test" handout, "Nicotine and Addiction Discussion Starter" handout, "Fagerstrom's Test" handout, "Nicotine: Harder to Kick. . . Than Heroin" handout (see Grade 9 Handout Masters).

INFORMATION:

Students need to understand why people begin to use tobacco and continue to do so. Acknowledging these reasons help those who smoke understand their addiction and it gives those who don't smoke good information about tobacco addiction.

CLASS ARRANGEMENT:

Large group.

INSTRUCTIONAL STRATEGIES:

1. Discuss with the class why people smoke. Write the ideas on the board and continue to have the class brainstorm.

2. Distribute the "What Kind of Tobacco User are You?" handout to the students to complete. After completion, read the "Scoring the Test" handout to the students.

3. Distribute the handout, "Nicotine and Addiction Discussion Starter." Have students complete the handout. After completion, discuss the student's responses and give correct answers.

4. Distribute the article on nicotine and have students read the article. Discussion may ensue.

RESOURCE:

Southwest Utah District Health Department.

TEST YOURSELF

WHAT KIND OF A TOBACCO USER ARE YOU?

1. Is it extremely difficult for you to go a half-day without using tobacco?

   ☐ YES ☐ NO

2. Do you have an intense repeated craving for tobacco?

   ☐ YES ☐ NO

3. Do you feel a need to smoke a certain minimal number of cigarettes each day or take a certain amount of dips each day?

   ☐ YES ☐ NO

4. Do you often find yourself smoking or chewing tobacco when you weren't aware of it?

   ☐ YES ☐ NO

5. Do you always smoke or chew at certain times, as when you're on the phone, watching TV, or when you're with certain friends?

   ☐ YES ☐ NO

6. Could you go for a whole day without needing to smoke or chew?

   ☐ YES ☐ NO

7. Do you smoke or chew more after having an argument with someone?

   ☐ YES ☐ NO

8. Is smoking cigarettes/chewing tobacco pleasant and relaxing?

   ☐ YES ☐ NO

9. Do you smoke or chew when you feel uncomfortable or upset?

   ☐ YES ☐ NO

10. Do you smoke/chew tobacco for the same reason you smoked/chewed the first time?

    ☐ YES ☐ NO

SCORING THE TEST

(FOR WHAT KIND OF A TOBACCO USER ARE YOU?)

The quiz **"Test Yourself"** will help you find out what kind of a tobacco user you are.

For questions **1, 2, and 3,** how many "yes" answers did you have? If you had two "yes" answers out of three, you are probably *addicted* to tobacco. In other words, your body "needs" the nicotine in tobacco.

For questions **4, 5, and 6,** how many "yes" answers did you have? If you had two "yes" answers out of those three, you are probably *habituated* to tobacco. That means using tobacco is a strong habit for you.

For questions, **7, 8 and 9,** how many "yes" answers did you have? If you had two "yes" answers out of those three, you are probably *psychologically* addicted to tobacco. Which means you have an emotional need to smoke or chew tobacco.

Don't be surprised if you answered "yes" to most of the questions. You can be addicted, habituated and psychologically dependent on tobacco! It may help you give it up if you can identify what role tobacco plays in your life.

Addiction: Physically or psychologically crave. Compulsive physiological or psychological dependence. Body needs nicotine or you have an emotional need to smoke or chew tobacco.

For people who are mainly *physiologically addicted* to tobacco, the first few days off are often the most difficult. However, after the withdrawal period is over, those people may find it easier to stay quit because their dependency is more physical than emotional.

For people who are *psychologically addicted* to tobacco, it is important to find other ways to cope with emotional needs and stress. Many people feel that tobacco relaxes them or comforts them. One way to break a psychological dependence on tobacco is to rely instead on friends for comfort during times of stress.

Habit: A behavior pattern acquired by frequent repetition which becomes routine and important. This behavior becomes so familiar that 1 pack a day/1 year smokers move their hand to their mouth 73,000 times.

People who are mainly *habituated* to tobacco may need to break the habits which go along with smoking or chewing. For instance, if a habituated smoker always sits around talking and smoking during break, that person may find it easier to give up smoking if he or she gets away from the smoking area and finds some other kind of activity to do. With this technique, you try to do something else in those situations which usually trigger an impulse to smoke or chew tobacco.

Of course, people who are addicted, habituated, and psychologically dependent may need to try many different methods when they give up using tobacco.

Nicotine and Addiction Discussion Starter

Before you begin your presentation about the effect of nicotine on the body, this true/false test will generate the students' interest in the topic and help them discover many surprising new facts! Note: You may choose not to ask all the questions, depending on the personality of your group and time limits. You may also choose to add your own questions.

Instruct the students to take out a piece of notebook paper and number from 1 to 12. Tell them this is not a test and the papers will not be collected. Read the true/false questions and explain the answers when all questions have been given.

1. Nicotine from an inhaled cigarette reaches the brain faster than from intravenous injections.

   TRUE—Within seconds approximately 1/4 of the nicotine has travelled through the bloodstream directly to the brain! (American Lung Association brochure, "Facts About Nicotine Addiction and Cigarettes," June 1988.)

2. Scientists have found that nicotine is as addictive as heroin, cocaine and amphetamines.

   TRUE—(Blakeslee, Sandra, "Nicotine: Harder to Kick. . . than Heroin," The New York Times Magazine, March 28, 1987.)

3. The majority of today's smokers began smoking after the age of 21.

   FALSE—Three quarters of current adult smokers began smoking before the age of 21. In fact, the majority of high school seniors who smoke began their addiction by age 16, and 57 percent by age 14. (National Institute on Drug Abuse, Drug Use Among American High School Students, College Students and Other Young Adults," 1986, published in 1987.)

4. Most smokers do not want to quit smoking.

   FALSE—In 1986, about half of all high school seniors who smoke cigarettes on a daily basis indicated they would like to quit; 53 percent have already tried to quit but were unable to do so. The addictive nature of nicotine is demonstrated by this statistic: less than 5 percent of daily smoking high school seniors think they will "definitely" be smoking five years in the future. Follow-up studies have shown that of the daily smokers in high school, 75 percent are still daily smokers on an average of eight years later. (National Institute on Drug Abuse, "Drug Use Among High School Students, College Students, and Other Young Adults," 1986, published 1987.)

5. An injection of one drop of nicotine will render an average-sized man unconscious within a few minutes.

   FALSE—One drop (70 mg) will kill an average man within a few minutes. Most cigarettes contain somewhere between .2 mg and 2.2 mg. (Educational Development Center, Inc., Teenage Health Teaching Modules, "Projecting Oneself and Others, Smoking, Drinking, and Drugs," 1982, p. 84.)

6. The more education a person has, the less likely it is that he or she will smoke.

TRUE—In 1986, 6.4 percent of college-bound seniors smoked a half-a-pack or more daily, compared with 19.2 percent of non-college bound seniors. (National Institute on Drug Abuse, "Drug Use Among High School Students, College Students, and Other Young Adults," 1986, published 1987.)

7. Fires due to cigarettes are the second-leading cause of all fatal home fires.

FALSE—Cigarettes are the first cause of fatal home fires. Many addicted smokers choose to smoke in bed before they fall asleep or first thing when they awake (not a safe thing to do). The time at which a person has their first cigarette is a measurement of their addiction. A person who smokes in bed in the morning may be more addicted than the person who has their first cigarette when they are walking to school.

8. A pack-a-day smoker deposits 1 cup of coal tar in his/her lungs every year.

FALSE—About one quart of tar will be deposited (American Lung Association, American Heart Association, "The Breathing Easy Teaching Guide," 1984, p. 4.)

9. Approximately 30 percent of teenagers smoke.

FALSE—In 1986, the breakdown of high school students who smoked a half-a-pack or more on a daily basis was:

16 percent Northeastern states
12 percent North Central states
10 percent Southern states
7 percent Western states

(National Institute on Drug Abuse, "Drug Use Among High School Students, College Students and Other Young Adults," 1986, published in 1987.)

10. Teenagers don't really care if their date smokes or not.

FALSE

62 percent teens in Northeastern states
68 percent teens in North Central states
81 percent teens in Southern states
81 percent teens in Western states

(Survey by American Lung Association conducted by Opinion Research Corporation in July 1986.)

11. Nicotine gives a person wrinkles and cold hands.

TRUE—Nicotine constricts the blood vessels which bring oxygen and warmth to all parts of the body. Without the proper amount of oxygen, skin ages faster. People who smoke or chew have impaired circulation which is particularly noticeable in the hands and feet. Stopping the use of nicotine will increase circulation and improve these areas. Many surgeons will not perform cosmetic surgery, heart surgery or many other kinds of operations unless the person stops using nicotine. (American Lung Association, "Facts About Nicotine Addition and Cigarettes," June 1988.)

12. If you smoke low-tar cigarettes, you don't really need to worry about health problems.

FALSE—There is no such thing as a safe cigarette. Low-tar cigarettes often produce higher levels of chemicals such as carbon monoxide than to high-yield cigarettes. What's more, to get the amount of nicotine they're used to, some smokers inhale deeper and more frequently. (American Lung Association, "Are You Kidding Yourself About Smoking?" from the Freedom From Smoking program.)

NICOTINE IS AN ADDICTIVE DRUG, BUT IT IS POSSIBLE TO KICK THE HABIT! MILLIONS OF PEOPLE HAVE QUIT AND YOU HAVE THE POWER TO BE SUCCESSFUL TOO!

Fagerstrom's Test
How Addicted to Nicotine Are You?

A = 0 points B = 1 point C = 2 points

1. How soon after you wake up do you smoke your first cigarette if there were no restrictions?
   A. after 30 minutes
   B. within 30 minutes

2. Do you find it difficult to refrain from smoking in places where it is forbidden, such as the library, school, and movie theater?
   A. No
   B. Yes

3. Which of all the cigarettes you smoke in a day is the most satisfying?
   A. Any other than the first one in the morning.
   B. The first one in the morning.

4. How many cigarettes a day do you smoke?
   A. 1-15
   B. 16-25
   C. +26

5. Do you smoke more during the morning than during the rest of the day?
   A. No
   B. Yes

6. Do you smoke when you are so ill that you are in bed most of the day?
   A. No
   B. Yes

7. Does the brand you smoke have a low, medium, or high nicotine content?
   A. Low (0.4 mg)
   B. Medium (0.5 to 0.9 mg)
   C. High (1.0 mg)

8. How often do you inhale the smoke from your cigarette?
   A. Never
   B. Sometimes
   C. Always

Total Points Scored_____

If you scored 4 points or more and want to quit smoking, you should see your doctor.

A high score means that you are probably dependent on nicotine and you are likely to experience some withdrawal when you stop smoking. A score of 7 or more is considered high. A score under 7 suggests that you are less likely to encourage physical symptoms due to withdrawal from nicotine.

Nicotine: Harder to Kick . . . Than Heroin

By Sandra Blakeslee

Despite overwhelming evidence that tobacco is destroying their health and shortening their lives, 53 million Americans continue to smoke. Increasingly aware that their addiction is also harmful to their children and co-workers, they continue to puff away on 570 billion cigarettes a year.

Many smokers are highly intelligent people with impressive levels of control over institutions, budgets, employees and political affairs. Yet, after repeated attempts to give up smoking, they find that they cannot control this one, seemingly uncomplicated, aspect of their behavior. Are smokers more weak-willed than nonsmokers or former smokers? Or do millions of people continue to smoke for reasons more powerful than previously imagined? What, for example, could possess a heart attack victim to light up a cigarette the moment he/she is wheeled out of the coronary care unit?

Interdisciplinary research in pharmacology, psychology, physiology and neurobiology is just beginning to shed light on the incredible hold that tobacco has on people. Scientists have found, for instance, that nicotine is as addictive as heroin, cocaine or amphetamines, and for most people more addictive than alcohol. Its hooks go deep, involving complex physiological and psychological mechanisms that drive and maintain smoking behavior and that even produce some "good" effects, such as improved performance on intellectual, computational and stressful tasks.

The bad effects are legion. Tobacco use is the number one preventable cause of illness and death in the United States. The medical bill for individuals with fatal illnesses related to smoking has been estimated at $60 million a day, according to a 1985 study by the congressional Office of Technology Assessment.

Since the first Surgeon General's report on smoking in 1964, about 37 million Americans have quit.

—Sandra Blakeslee is a freelance writer living in Los Angeles.

Grade 9

LEVEL: SECONDARY

WHO IS MORE LIKELY TO SMOKE AS A TEENAGER?

OBJECTIVE:

To provide an understanding of why teenagers smoke.

LIFE SKILL:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as parts of healthy lifestyles.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

"Who Is More Likely to Smoke as a Teenager?" handout, "Why People Smoke?" handout (see Grade 9 Handout Masters).

INFORMATION:

As with other risk behaviors, smoking is a detriment to a person's health. Teenagers who are knowledgeable about the risks and concerns of smoking are less likely to start smoking. The reasons for smoking are many, and are generally the same reasons for other risk behaviors.

CLASS ARRANGEMENT:

Large group.

INSTRUCTIONAL STRATEGIES:

On the board, have students list some characteristics of smokers and characteristics of non-smokers. Distribute the handouts. Discuss the students' observations, and how the observations compare with the information on the handouts.

RESOURCE:

Utah County Department of Health.

Who is More Likely to Use Tobacco as a Teenager?

Prevalence of Tobacco Use

- 90 percent of all smokers start by age 19.
- 60 percent of all smokers start by age 14.
- The younger one starts to smoke, the more likely one will:
  1. Remain a smoker
  2. Smoke more heavily
  3. Die prematurely
- 3,000 teenagers light up for the first time everyday in the U.S.
- Over 3,000 Montanans begin using tobacco every year.
- The average age Montana youth start to smoke is 13.
- The average age Montana youth start to use smokeless "spit" tobacco is 10.
- Smokeless tobacco rates in Montana are **two and one-half times the national average.**
- Tobacco-related illness/disease is the single most avoidable cause of death.

Who is More Likely to Use Tobacco?

- Adolescent smokers are more likely to hold part-time jobs while in schools, come from single parent families, and are less likely to go to college. The more education a person receives, the less likely that person is to use tobacco.
- Children of tobacco users are more likely to use tobacco themselves.

Why Do Adolescents Use Tobacco?

1. Peer pressure and social acceptance.
2. A desire to appear mature.
3. A desire to assert independence.
4. A desire to mimic parents or role models.
5. Advertising and promotion by the tobacco industry.
6. Dependency on nicotine (nicotine is an addictive substance which may be harder to quit using than heroin).

Why People Smoke

Emotional Reasons

Relates to needs that are not being met.

- Increase self-esteem or self-confidence.
- Escape emotional upset.
- Reduce anxiety or tension.
- Avoid pressure of making a decision.
- Assert independence.

Physical Reasons

Relates to the physical effects that result from using. Attempting to:

- Feel relaxed.
- Block pain.
- Intensify sensations.

Social Reasons

Relates to the need to interact with other people. Attempting to:

- Gain recognition or admiration of friends.
- Overcome shyness.
- Escape loneliness, family problems, etc.
- Aid communication.

Intellectual Reasons

Relates to effects of cigarettes on thought processes. Attempting to:

- Better "understand self."
- Avoid mental fatigue.
- Satisfy curiosity.

Combination

Relates to several purposes listed above being served. For example, smoking may serve social need for acceptance, physical need for relaxation, and emotional need for self-esteem.

Grade 10

LEVEL: SECONDARY

TOBACCO ADVERTISING

OBJECTIVE:

To learn about "look-alike" products that entice young people into thinking that smoking and chewing tobacco are cool.

LIFE SKILLS:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

Magazine advertisements about smoking and chewing tobacco, "Look-alike Products" handout, "Tobacco Advertising Discussion" handout (see Grade 10 Handout Masters).

INFORMATION:

This exercise involves youth to actively seek out "look-alike" products and increasing the understanding of the impact of tobacco advertising on youth.

CLASS ARRANGEMENT:

Classroom.

INSTRUCTIONAL STRATEGIES:

Briefly discuss tobacco addiction and discuss how tobacco companies successfully advertise their products by promoting them to youth as being cool, e.g., Marlboro Man and Joe Camel. Discuss "look-alike" products. Discuss the "Look-alike Products" handout and review the "Tobacco Advertising Discussion" handout. Give students an assignment to visit a grocery store and make a list of where "look-alike" products are located and what products are nearby. Have students bring two to three magazine ads depicting smoking to class for discussion.

RESOURCES:

Utah County Department of Health.

Look-Alike Products

Compare "Big League" or other bubble gum in soft foil wrapping with "Red Man" or other chewing tobacco.

- Discuss the size and shape are the same.
- Package closing is the same.
- Texture (softness of pack) is the same.

Compare a package of "Candy Cigarettes" with a pack of "cigarettes." Example: Pell Mell candy cigarettes with Pall Mall cigarettes.

- Discuss coloring of package.
- Discuss shape and size of package.

Compare a round can of "beef jerky," or "rolled bubble gum" with a round can of "snuff."

- Discuss coloring of the can.
- Discuss size and shape.

Ideas for Discussion:

1. If kids get used to having "Look-Alike" products around in their purse or locker, it is much easier to purchase tobacco when they are older.

2. If we don't purchase "Look-Alike" products, we will be much less tempted to purchase tobacco when we are older.

Tobacco Advertising Discussion Sheet

Advertisements bombard us constantly and they shape our ideas about many things. Tobacco companies advertise with the assumption that their products can make you cool, macho, sexy, popular, pretty, and masculine. The purpose of this discussion is to increase the student's awareness and understanding of the false messages conveyed to us through advertising.

Following are some ideas students should consider while reviewing the ads:

1. What is being portrayed in the ad?
2. What are the facial expressions?
3. Where is the product? How is it being used?
4. What is in the background? How does this affect the message of the ad?
5. What is the false message being advertised?
6. Are the subliminal messages?
7. What does the large type say and imply?
8. What types of people are there in the ad?
9. Who is using the product, and in what way?
10. Who or what type of people is the message intended for and why?
11. What colors are used and how does this add or subtract to the effectiveness of the ad?
12. What type of attention grabber is being used?
13. What symbols are associated with the brand of the product?
14. How does this symbol help sell the product?

Grade
10

LEVEL:
Secondary

Tobacco: Win, Lose or Draw

Objective:

To identify the harmful effects of smoking, smokeless tobacco and environmental tobacco smoke (ETS).

Life Skills:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as part of a healthy lifestyle.

Teaching Facility:

Classroom.

Equipment/Materials:

Flip chart, markers, timer and index cards with category information from "Tobacco: Win, Lose or Draw" (see Grade 10 Handout Masters).

Information:

This activity is interactive and is based on the television show, "Win, Lose or Draw."

Class Arrangement:

Large group.

Instructional Strategies:

Begin the class with a discussion of the hazards of tobacco. Next, have students play the game (you will need to make several category cards in advance of the activity). Each card will have a category heading with a list of five terms that are associated with the category term. When preparing cards, consider the topics discussed in class. This activity would provide an excellent opportunity for a review. This activity should be used after students have developed an understanding of the harmful effects of tobacco use.

1. Divide the class into teams. Have teams select one person to draw. Distribute a category card to the student selected to draw from the team that will go first.

2. Explain that the student will have 90 seconds to draw pictures that will lead his team to the correct answer. The students will attempt to complete all five drawings and receive correct responses from his/her team before the 90 seconds expire.

3. The student's drawing must not use words, symbols, numbers or letters. If these clues are used, the student must move to the next term.

4. Reward 10 points for each correct answer.

5. The drawing team has an opportunity to earn 10 bonus points by correctly identifying the category listed on the card. If the drawing team responds incorrectly, the opposing team has an opportunity to "steal" the bonus points by giving a correct answer. The opposing team will then take their turn at drawing. This procedure is followed until all cards are used or playing time runs out. Make sure a new student draws during each team's turn.

Evaluation/Modification:

Students could make up additional cards to be used for another class.

Resource:

Utah County Department of Health.

TOBACCO: WIN, LOSE OR DRAW

Category Card:

"Withdrawal Symptoms"

Draw clues that will lead your teammates to say the following five terms:

COUGHING
HEADACHE
DRY MOUTH
HUNGRY
NERVOUS

Category Card:

"Secondhand Smoke"

Draw clues that will lead your teammates to say the following five terms:

AIR
DANGER
CHILDREN
INHALE
CHEMICALS

Category Card:

"Smokeless Tobacco"

Draw clues that will lead your teammates to say the following five terms:

SPIT
SNUFF
BASEBALL PLAYERS
MOUTH
CANCER

Category Card:

"Nicotine"

Draw clues that will lead your teammates to say the following five terms:

DRUG
TOBACCO
POISON
"BUZZ"
ADDICTION

Grade 10

LEVEL: SECONDARY

THE MEDIA MYTH

OBJECTIVE:

To understand the media influence on choices regarding one's health.

LIFE SKILL:

To promote good mental and environmental health practices within families and communities as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

Magazines, scissors, glue, poster board.

INFORMATION:

Much of today's advertising is geared to the younger population because of their spending practices. As a group, adolescents spend more money on products than any other group. Furthermore, adolescents are much more swayed by effective advertising because of their naivety and their quest for an identity. Beer and cigarette commercials are obviously affecting their choices, but almost any ad in a magazine can and does affect an adolescent's behavior. For instance, ads that portray slender models to sell a product influence girls who are looking for role models and may feel this is the way a "woman" should look. To get to this unreachable point, many girls will starve themselves (anorexia) or vomit (bulimia) to look thin. Moreover, sexually implicit ads condone and show adolescents how "adults" should behave. Boys are also influenced by male role models who are macho, dominant, sometimes abusive, and who resolve conflict through violence. Advertising uses these powerful messages in most areas because it is a proven means to sell a product.

CLASS ARRANGEMENT:

Classroom with large tables.

Instructional Strategies:

1. Discuss how media affects us not only in buying practices but in how we perceive ourselves and how we should be.

2. Have students pick a subject to study, e.g., bulimia, anorexia, self-esteem, sex, drug use including alcohol and tobacco, nutritional habits, etc.

3. Using their topic, students should sort through the magazines and cut out ads that show what the ad is influencing, not exactly what it proposes to sell.

4. Using the cut out ads, students can make a collage based on the topic.

5. When finished, have each person talk about their collage and why they chose a particular topic.

Evaluation/Modification:

This exercise can be expanded school-wide by having different classes focus their projects extensively in a particular area. Hang the projects throughout the hallways for other students to view. It is important to have a brief explanation with each project, talking about the influences of advertising. This project could easily be done at home if space is not available in the classroom. You might want to put some restrictions on the assignment regarding the types of ads. Some advertising in magazines can be very risque, and these might violate school district policies.

Resources:

Winick, C. (1973). Sex in Advertising. In R. J. Glessing and W. P. White (Eds.), Mass Media: The Invisible Environment. Chicago, IL: Science Research Associates.

Grade 11

LEVEL: SECONDARY

UNDERSTANDING TOBACCO ECONOMICS

OBJECTIVE:

To understand the economic costs of tobacco use in our country.

LIFE SKILLS:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

"Tobacco: Paying the Bill" and "Smoking and Economics" handouts (see Grade 11 Handout Masters).

INFORMATION:

Most people are not fully aware of the magnitude of the economic costs of tobacco. This exercise will help students realize the societal costs of tobacco use.

CLASS ARRANGEMENT:

Large group.

INSTRUCTIONAL STRATEGIES:

The students should be given the following short writing assignment: write down all the ways they can think of that tobacco can cost money. Remind students that purchasing cigarettes is only part of the cost. When they have finished writing, call on volunteers to read their ideas. Distribute the "Tobacco: Paying the Bill" handout to students to complete. Conduct a discussion of the costs of smoking to society.

Ask the students the following questions: **What is the leading cause of cancer in the United States?** (Answer: tobacco use.) **Why are insurance and hospital costs higher due to tobacco?** (Students' answers should reflect that tobacco-related illnesses translate into more hospital stays and thereby affect insurance rates. Remind students that everyone must pay for this burden.) **Why does tobacco use cause a loss in worker wages?** (Answer: Illness related to tobacco use leads to loss of work days.) **Why does tobacco use cause a loss of worker**

productivity? (Answer: Time spent on this habit includes smoking on-the-job.)

Conclude your discussion by pointing out to students that although the financial costs of tobacco are high, loss of life and health costs in our society are the greatest losses. Have the students revise the writing they did before the discussion to include the new categories they have learned concerning the financial costs of tobacco use.

Distribute the handout "Smoking and Economics" to the students and discuss.

RESOURCES:

Discover: Skills for Life, Educational Assessment Company.

Tobacco Free Montana, 825 Helena Avenue, Helena, MT 59601, 442-6556 in Helena or 1-800-LUNG-USA.

Tobacco: Paying the Bill

Health Bill

Lung disease	90% of total
Coronary deaths	30% of total
Cancer deaths	80% of total
Total cost due to tobacco use:	**1,000 deaths per day**

Financial Bill	Your Estimates
Higher insurance rates	$
Lost worker production	$
Lost wages	$
Hospital costs	$
Higher taxes	$
Total cost due to tobacco use:	**More than $50 billion per year**

Adapted with permission from Discover Skills for Life (7th), p. 14. Educational Assessment Company

California Department of Education—Health Kids Tobacco-Free Training
Funded by California Tobacco Tax

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Smoking and Economics

Cigarette smoking takes many lives prematurely each year in Montana, a problem which affects smokers—and even those who choose not to smoke. As a matter of fact, the economic toll associated with the excess morbidity, mortality, disability and loss of work productivity is staggering. The economic costs of smoking can be translated into direct health care costs for medical and dental care and into indirect costs which stem from sickness, premature death, disability and lost wages. Taken together, these numbers shed new light on the subject of cigarette smoking and question its place in modern day society.

General Statistics

- Cigarette smoking kills nearly 1,200 Montanans each year. That is nearly one out of every five deaths in the state.

- In Montana, 18 percent of adults smoke, and 23 percent of youth smoke. This totals approximately 125,000 residents filling the air with carcinogenic environmental tobacco smoke.

Economic Statistics:

- Over $32 million is spent each year in Montana by our health care system to treat smoking attributable disease and illness. This includes hospitalizations, physician fees, nursing home expenses, medications and fees of other professionals.

- An additional $13 million is wasted needlessly on the indirect morbidity costs of smoking, such as lost wages from work due to sickness or disability.

Hospitalization:	$22,133,761
Physician fees:	5,159,116
Nursing home	2,750,606
Medications	2,049,771
Other professionals	165,522
Indirect morbidity	13,557,872
TOTAL	**$45,816,648**

- Nearly 200,000 days of work productivity are lost each year in Montana due to smoking attributable sickness and/or disability.

Grade 12

LEVEL: SECONDARY

UNDERSTANDING THE TOBACCO INDUSTRY

OBJECTIVE:

To understand the impact of the tobacco industry on economics and health risks.

LIFE SKILLS:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as part of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

"Tobacco Industry Advertising and Promotion" handout (see Grade 12 Handout Masters), "Youth Access to Tobacco Products Control Act" (see appendix C).

INFORMATION:

Tobacco contains substances that can kill a tobacco user when the products are used as directed. The tobacco industry is very powerful and adept at manipulating health facts and promoting their products. Because they have so much money, they can buy influence in legislatures across the country and support laws that are not very restrictive against tobacco use or against the sale of tobacco to minors. A great deal of money is spent on advertising in magazines read by young people and to support cultural and sporting events.

This lesson plan activity is designed to put students to work in their own community to research the impact of the tobacco industry on their lives.

CLASS ARRANGEMENT:

Large group.

INSTRUCTIONAL STRATEGIES:

Divide the class into small groups, having each group research the role and impact of each of the following subjects:

a. Lobbyists who act on behalf of tobacco-related groups such as growers, distributors and retailers.

b. Incentives and subsidies that are available to the tobacco industry, locally, at the state level and at the federal level.

c. Laws currently governing smoking in public places or laws being considered to regulate the use of tobacco products.

d. Recent court cases on the liability of tobacco producers for illness caused by using tobacco.

Have the small groups report back to the class the information they were able to discover.

Evaluation/Modification:

Students can organize a letter-writing campaign to legislators at the local and state levels requesting that Montana's law prohibiting the sale of tobacco to minors be strengthened. Currently, the law states that no local community can have a law stronger than the state law. Current Montana law also forbids the possession or use of tobacco by persons under the age of 18 (see Appendix C).

Resources:

Tobacco Free Montana, 825 Helena Avenue, Helena, MT 59601 (442-6556) or (1-800-LUNG-USA).

American Heart Association: Heart Decisions Module Two, Follow-Up Activity #4.

Tobacco Industry Advertising and Promotion

Tobacco is one of the most heavily marketed products in the United States. In 1990 alone, the tobacco industry spent $2.99 billion to advertise and promote its products nationally. That's about $10.9 million each day or over $7,650 per minute.

It is easy to understand why the industry needs to spend so much on advertising and promotion. After all, tobacco is the only product which, when used as directed, kills a high proportion of its customers. Those who die and those who quit must constantly be replaced.

Each year the tobacco companies report their spending on advertising and promotion to the federal Trade Commission by category (such as magazines, coupons, retail value-added offers and public entertainment) and the figures reveal a changing trend.

Advertising:

Tobacco advertising, banned from television and radio since 1971, is allowed only in print and outdoors—and has been decreasing steadily.

Promotion:

Increasingly, the tobacco industry is putting its marketing dollars into promotion, which includes coupons, promotional allowances for retailers and distributors, promotional merchandise, and sponsored events. In 1970, promotional materials accounted for only **12 percent** of the tobacco industry's budget, while in 1990, it accounted for **71 percent** of its $3.99 billion budget.

Promotions often advertise tobacco, turning users into walking billboards. Promotion also gains television and radio coverage through sponsoring sporting events like rodeos in Montana and by sponsoring other community events such as entertainment at fairs. In Billings, for example, Philip Morris (makers of Marlboro cigarettes) donated over $75,000 to MontanaFair in order to sponsor all the night shows during the fair. Banners with Marlboro were there for all who attended to see. In addition, Marlboro was advertised in the Billings newspapers and information about Marlboro sponsorship was placed in a brochure advertising the Billings fair. Philip Morris also had a promotional booth at the fair and hired young attractive men and women to promote their products by offering special offers and giveaways. They received a lot of free publicity for their donation and received a lot of public support because the fair is an important community event. What this type of sponsorship does is to promote name recognition of Marlboro, by having young people push their tobacco make it appear cool to use tobacco, encourage young people to smoke, encourage the trial and/or purchase of a product through free samples and coupons, gaining public support and, by having attractive young people promote their products, make it appear very cool to use tobacco.

Statistics: Health Promotion Resource Center, Stanford University School of Medicine

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Grade
12

LEVEL:
Secondary

Last Will and Testament

Objective:

To creatively reinforce positive behaviors.

Life Skills:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as part of a healthy lifestyle.

Teaching Facility:

Classroom.

Equipment/Materials:

"Jacob M. Bayfield Will and Testament" handout, biographical sketches of the Bayfield children (see Grade 12 Handout Masters).

Information:

Students are asked to work in four groups to participate in a scenario about an eccentric millionaire with four children. The millionaire has recently died and in his last will and testament left his fortune to only one of his four heirs.

Each group is to serve as a team of lawyers to try to get the inheritance for their client (one of the four Bayfield heirs). Each group will be given a biographical sketch of the heirs to create a defense for the client assigned to them. The students are asked to identify influences that might pressure the client to smoke and demonstrate how their client can resist those influences. Each group is asked to defend the health habits or characteristics of their client.

Class Arrangement:

Large group, small groups.

Instructional Strategies:

Students should receive the handout of the "Jacob M. Bayfield Will and Testament." As the groups start to work, help them focus on influences, resistance, barriers to resistance, viable alternatives to tobacco, obstacles to a smoke-free life, general lifestyle of each client, and the clients' contributions to community welfare. Follow with an activity in which the groups define the health habits or characteristics of their clients.

Resource:

A Smoke Free Generation, Activity 1, Day 1, The Will to be Healthy, pp. 2-11, Minnesota, Inc.

Jacob M. Bayfield Will and Testament

I, Jacob M. Bayfield, being of sound mind but unhealthy body, do hereby declare that my entire estate be left to but one of my four children. This one child will be my sole heir and benefactor. All property and holdings will be left unto this person. A person's life is often best remembered by the deeds he has done and the lifestyle in which he has lived. While my business has prospered, and I have gained power beyond most, I have not set health and fitness as a personal goal. As a young boy, I started smoking. At that time, we had no knowledge of the harm smoking could cause. Rather than listen to medical experts and my own family, I continued to smoke for the rest of my life. Now I am sure that this habit will lead to my premature demise. Therefore, I here and now establish the Jacob M. Bayfield Foundation to determine which of my four children is the healthiest and least likely to become a smoker, being able to resist the influences to smoke which I could not. My entire estate will then be given to that child so that my wealth will be used for good health.

Signed Jacob M. Bayfield

NICK BAYFIELD

Nick is the eldest of the Bayfield children and was very upset by his father's death. Nick is the owner and president of the local baseball team and in three short years has turned the team from losers into world champs. Nick is a natural leader. He happily shakes hands and gives autographs to the people who seek him out. Most people in the community think of Nick as a local hero of sorts and some have even suggested that he run for Congress.

To his business partners, however, Nick is considered a "smoke-filled back room wheeler dealer." Several times he has used his influence to take over smaller businesses, showing little compassion for those whose lives and fortunes he has destroyed. It is rumored that he is under criminal investigation by the federal government for bribery and smuggling. Nick has been able to keep the investigation out of the news--along with the fact that he has had his driver's license revoked for drunken driving.

Nick's skills in negotiating business deals and his international connections have been recognized worldwide. He has been a chief negotiator in major peace treaties all over the world. Nick has not only helped to end localized wars, but has also helped to fund rebuilding by providing aid to the victims of war-torn nations. These efforts have won him a Nobel Peace Prize nomination.

Nick has had trouble keeping his weight down. He works out at the health club three days a week and his major interest there is weight-lifting and body building exercises. He loves to swim and takes brisk walks. The family has a baseball-shaped swimming pool in the backyard which Jacob had built for them before his death. Nick makes good use of the pool.

Last week, a group of community leaders visited Nick to inquire about the unhealthful foods available at his ball park and the advertising of alcoholic and tobacco products. They claimed the hotdogs were full of sugar, the popcorn was covered in salt, the Polish sausages were nothing but fat, the ice cream was full of empty calories, and that tobacco and alcohol were not good for impressionable youth. The group suggested some healthy alternatives that could be served in place of the unhealthy food items and other products that could be advertised. Nick refused to listen to their arguments and had the group removed from his office.

Because of Nick's high visibility and his star status in the community, a new tobacco company has approached him to become their spokesperson and endorse their new low tar cigarettes. Nick agreed, provided he doesn't have to inhale in the ads. However, during a photo session of the commercial he became anxious after the take had to be reshot. The director whom Nick finds extremely attractive (and vice versa) suggested that the "real" Nick will come out if he just inhales and relaxes just as she does.

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ABBY BAYFIELD

Abby is the second oldest of the Bayfield children. She is the owner and operator of Bayfield Health Clubs, Inc. Abby started her business with one private health club that was frequented by athletes, weight lifters, and body builders and transformed it into a community facility. The health club now offers a wide variety of activities from aerobics to intramural basketball teams and general fitness awareness classes. Because of her keen interest in community welfare, Abby has recently funded service projects for disadvantaged adolescents.

The success of the Bayfield Health Clubs is a reflection of Abby's views of the importance of physical fitness. She participates in many sports, particularly swimming, which she does faithfully every day. She also coaches and has organized a city-wide girls' basketball league.

Abby is also the manager, financial officer and chief administrator of the health clubs and the community help programs which she actively supports. In addition, she sits on a number of social action committees and boards of directors. After three hours of sleep, Abby goes nonstop in her never-ending series of meetings. She often takes on more responsibility than time permits and becomes overstressed when she cannot carry out the responsibilities to her satisfaction.

Because of Abby's busy schedule, she is always eating on the run, usually skipping breakfast, grabbing a quick burger and fries for lunch and then again for dinner. After a long day of work and meetings, it is typical of Abby to go home, grab a bowl of dip, a bag of chips, and a bottle of beer and turn on the "tube" until the wee hours of the morning. These four or five hours of T.V. watching are Abby's way of unwinding from her hectic day.

Although Abby is very confident handling the pressures that go along with the business world, she is insecure about her social life. She has few close friends, is often alone, and has rarely gone out with the same guy more than once. As Abby would say, "I'm a great team manager, but I'm no good at playing the field." Recently, she has been dating her state senator, a heavy smoker. She accompanies him to cocktail parties and political gatherings. Abby is often uncomfortable at these parties because she doesn't think she fits in. Her boyfriend has noticed that when she feels uncomfortable she tends to eat half the buffet table. This has made Abby even more self conscious, though at the last party she noticed that the two people she was talking to were smoking while she was pigging out on caviar and cheese chunks. Abby thought it was unfortunate that these attractive people reeked of smoke and had dragon breath.

Over the past five years, Abby has had 6 major car collisions. Luckily, she has not been injured, although others have been. Before his death, Jacob expressed his concern over Abby's fast-paced lifestyle and driving habits.

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BIOGRAPHICAL SKETCH

ROSS BAYFIELD

Ross is the second youngest of the Bayfield children. He owns and manages seven movie theaters and several apartment buildings. Though a confirmed family man, he shows little understanding or compassion for his low-income renters. Last winter he tried to cut off the heat and electricty of late-paying renters. He has been cited several times for violating city health codes.

Ross and his wife have four children. Because of the death of one of his small children, Ross is the major contributor to the children's wing of the county hospital, of which he is president of the board. He has recently overruled a board decision designating the hospital as a smoke-free space.

The loss of his infant child moved Ross to devote every waking hour to the invention of a new type of incubator that has already saved thousands of babies' lives, but was too late to save his own daughter. Each night after a stressful day of decision making, he leaves the family compound, working alone until dawn to improve the incubator to save even more lives.

When his youngest child was a baby, Ross, a former state swimming and diving champion, had a serious diving accident which left him paralyzed from the waist down. He felt insecure and inferior because of his confinement to a wheelchair. Because of this he looked for ways to seem more sophisticated and powerful. He often told people that he pictured himself as the "macho Marlboro man on wheels." Since the accident he has become overprotective of his children. Because he is afraid that they too might have an accident, he does not allow them to get involved in many athletic sports. Ross' wife, however, does try to get the children out and active, against their father's wishes.

Despite his disability, Ross is an enthusiastic pilot. He owns a specially equipped Leer jet that he uses to transport dying infants from all over the world to his infant-care facilities. He also flies medical teams to remote villages around the world to train local doctors in infant care and the lifesaving use of the incubators.

Ross is a great fan of the movies, especially those about fighter pilots. As he soars high above the clouds he likes to picture himself as a top gun fighter pilot, off on a daring adventure, cigarette dangling from his lips, courage in his heart, and romance in his eyes.

Lately Ross has been spending a great deal of time at the state capitol lobbying for a bill which would allow smoking in movie theaters. This sudden interest coincides with his recent investment in a large tobacco company.

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MOLLIE BAYFIELD

Mollie is the youngest of the Bayfield children. Her father spoiled her as a child and Mollie has had a hard time growing up. When she was in junior high school Mollie hung around with kids her parents strongly disapproved of. At the age of fourteen, she ran away, started smoking and lived on the wild side of the streets. She continued this way of life for two years until she met an astrologer, Madame Crystal, who advised her to return home and begin a healthy lifestyle. Ever since, Mollie has been devoted to astrology and regularly consults Madame Crystal. Many of her personal and business decisions are based on the positions of the stars and planets.

Proud of his daughter's recovery, five years ago Mollies's father gave her a restaurant for her birthday, which she turned into a huge success. Upon the advice of an astrologer, she later purchased four more restaurants. "Bayfield's Brunchola" has become a chain of popular, trendy cafes where young professionals and athletes go for gourmet health food.

Mollie's expertise and creativity with gourmet health foods has been written up on several magazines. Although the overall business is a success, the employees often abuse Mollie's generous nature by borrowing money from her and taking advantage of her friendship.

Mollie is an avid runner. She runs twenty miles a day and has won four marathons, one race away from a national record. She actually might have won her fifth marathon, but the local TV station obtained pictures of her getting in a car halfway through the race and claimed she really didn't run the whole way. Mollie denies this. She encourages her friends and family as well as her restaurant patrons to exercise. For the last five years, she has sponsored statewide ten-kilometer races, with hundreds of thousands of dollars worth of proceeds going to the Humane Society.

The foods that Mollie eats are very healthy, but not enough for someone so active. Mollie is extremely weight conscious and very thin. Her doctor is concerned about possible anorexic behavior and says she needs to gain at least 20 pounds. Mollie's father was very worried about her weight. Mollie thinks she is slim, but healthy, even though she has fainted twice this month.

Mollie's compassion for others is demonstrated by her creation of "Meals on Heels" - a program to bring leftover restaurant food to poor, elderly people who are unable to cook for themselves. She has organized high school track teams throughout the city to deliver the meals. The hungry people she helps affectionately call her "St. Mollie" and the runners look to her as an important role model.

When Mollie's father died she was devastated. The night before her father's sudden death he had asked her to come over for dinner. Although she really had no special plans, she made up an excuse so she could squeeze in an extra run. She never saw her father alive again. Upon hearing the news of her father's death she was overcome with guilt. She sank into a deep depression, often unable to get up in the mornings, or to make even the simplest decision. She stopped running and became nervous and jittery. Mollie consulted her astrologer who said, "The answer to your problems lies in the patterns of past smoke rings."

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Grade 12

LEVEL: SECONDARY

AWARENESS OF SMOKING HABIT

OBJECTIVES:

To understand why students are addicted to tobacco; to understand ways to overcome the addiction.

LIFE SKILLS:

To discourage the use of alcohol, tobacco and other drugs, and encourage the responsible use of prescription drugs as parts of a healthy lifestyle.

TEACHING FACILITY:

Classroom.

EQUIPMENT/MATERIALS:

"Three Aspects of Smoking" handout, "Tobacco Sentence Completion" handout, "Why I Want To Smoke, Why I Want To Quit" handout, "American Cancer Society Tip Sheet" handout, "What A Smoking Friend Can Do To Help" handout (see Grade 12 Handout Masters).

INFORMATION:

It is important to encourage young smokers to quit smoking. Many times students don't analyze reasons for tobacco use and often think they can quit any time they want to.

CLASS ARRANGEMENT:

Large group.

INSTRUCTIONAL STRATEGIES:

Distribute the "Three Aspects of Smoking" handout and have students complete. After completion, discuss the results. Distribute the "Tobacco Sentence Completion" handout and have students complete the handout. Discuss the results.

Distribute the "Why I Want to Smoke, Why I Want to Quit" handout and have the students brainstorm reasons for smoking or for quitting.

Discuss the "American Cancer Society Tip Sheet" and "What a Smoking Friend Can Do to Help" handouts. Allow time for questions and answers.

Evaluation/Modification:

The students could keep a diary of the number of cigarettes smoked in a 24-hour period and how the student was feeling at the time.

Resources:

Tobacco Free Montana, 825 Helena Avenue, Helena, MT 59601 (442-6556) or (1-800-LUNG-USA).

The American Heart Association.

THREE ASPECTS OF SMOKING

	Yes	No
1. Is it extremely difficult for you to go a half-day without smoking?	☐	☐
2. Do you have an intense recurring hunger for cigarettes?	☐	☐
3. Do you feel a need to smoke a certain minimal number of cigarettes each day?	☐	☐
4. Do you often find yourself smoking a cigarette when you weren't aware of lighting one up?	☐	☐
5. Do you link your smoking with other behaviors, like drinking, coffee and smoking, or talking on the phone and smoking?	☐	☐
6. Do you sometimes unintentionally go a whole day without smoking?	☐	☐
7. Do you smoke more after having an argument with someone?	☐	☐
8. Is smoking one of your most important pleasures in your life?	☐	☐
9. Does the thought of never again smoking make you feel unhappy?	☐	☐

SCORING THE TEST:

If you answered yes to two out of three questions 1, 2, and 3, you are chemically addicted to cigarettes. If you answered yes to 2 out of 3 questions 4, 5, and 6, you are habituated to smoking. If you answered yes to two out of three questions 7, 8, and 9, you are psychologically dependent upon cigarettes. Many people find they answer yes to most of the questions, that they are addicted, habituated, and psychologically dependent upon cigarettes. This is normal.

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Source:
American Cancer Society
Freshstart Program.

Tobacco Sentence Completion

1. For me, smoking is:

2. If I saw another student using tobacco at school, I would:

3. Some people start using tobacco because:

4. Cigarettes are:

5. To me, tobacco means:

6. The best reason for smoking is:

7. One thing I don't believe about tobacco is:

8. If I made the laws about tobacco use, I would:

9. I was surprised to learn that smokeless tobacco:

10. People who smoke:

Why I Want To Smoke

Why I Want To Quit

American Cancer Society

Tip Sheet

The following are the different ways smokers have actually used in restraining themselves to live without cigarettes. Any one or several of these methods in combination might be helpful to you. Check the ones you like and from these develop your own restraining program.

1. Before you quit smoking, try wrapping your cigarettes with a sheet of paper like a Christmas present. Every time you want a cigarette, unwrap the pack and write down what you re doing; how you feel and how important this cigarette is to you. Do this for two weeks and you'll have cut down as well as have developed new insights into your smoking.

2. If cigarettes give you an energy, try gum, modest exercise, a brisk walk or a new hobby. Avoid eating new foods that are high in calories.

3. If cigarettes help you relax, try eating, drinking new beverages, or social activities within reasonable bounds.

4. When you crave cigarettes, you must quit suddenly. Try smoking an excess of cigarettes for a day or two before you quit so that the taste of cigarettes is spoiled. Or, an opportune time to quit is when you are ill with a cold or influenza, and have lost your taste for cigarettes.

5. On a 3" x 5" card, make a list of what you like and dislike about smoking. Add to it and read it daily.

6. Make up a short list of luxuries you have wanted or items you would like to purchase for yourself or a loved one. Next to each item write down the cost. Now convert the cost to "packs of cigarettes." If you save money each day from packs of cigarettes, you will be able to purchase these items. Use a special "piggy" bank for saving your money or start a "Christmas Club" account at your bank.

7. Never smoke after you get a craving for a cigarette until **three** minutes have passed since you got the urge. During that three minutes, change your thinking or activity. Telephone an ex-smoker, your buddy, or someone you can talk to until the craving subsides.

8. Plan a memorable date for stopping. You might choose your vacation, New Year's Day, your birthday, a holiday, the birthday of your child, your anniversary. But, don't make the date so distant that you lose momentum.

9. If you smoke under stress at work, pick a date for stopping when you will be away from your work, or at least under the least amount of stress.

10. Decide whether you are going to stop suddenly or gradually. If it is to be gradual, work out a tapering system so that you have intermediate goals on your way to an "I.Q." day.

11. Don't store up on cigarettes. Never buy by the carton. Wait until one pack is finished before you buy another.

12. Never carry cigarettes with you at home or work. Keep your cigarettes as far from you as possible. Leave them with someone or lock them up.

13. Until you quit, make yourself a "smoking corner" that is far from anything interesting. If you like to smoke with others, always smoke alone. If you like to smoke alone, always smoke with others, preferably if they are non-smokers. Never smoke while watching television.

14. Never carry matches or a lighter with you.

15. Put away your ashtrays or fill them with objects so they cannot be used for ashes. Plant flowers in them or fill with walnuts. The latter will give you something to do with your hands.

16. Change your brand of cigarette weekly so you are always smoking a brand of lower tar and nicotine content than the week before.

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What a Smoking Friends Can Do to Help

1. There are so many things that friends enjoy doing together such as eating together, drinking together, and best of all, SMOKING TOGETHER.

2. Your friend and family member has made a decision to quit smoking. It is one of the biggest and most fearful decisions they will ever make. THEY NEED YOUR HELP THE MOST OF ALL. It's bad enough having been nagged by society to quit. When they finally take the big step, they don't need friends encouraging them **back** to smoking; they need your help.

3. Their physical, emotional, and spiritual health may be at stake if they continue to smoke. Please do all you can to set them up for SUCCESS.

4. The first few weeks after a smoker quits smoking are when they are so vulnerable to having "just one cigarette" for old time's sake. Smoking has been a form of companionship, and they may feel a little guilty for net being able to smoke with you. WOULD YOU PLEASE HELP THEM FIND ANOTHER FORM OF COMPANIONSHIP THAT YOU CAN STILL ENJOY TOGETHER?

5. During the first few days of nicotine withdrawal, another smoker's smoke can smell DELICIOUS...this is all that it takes to tempt the ex-smoker back to smoking. It won't kill **you** to step outside to smoke, but it might kill **them** if they go back to smoking when their health is at stake. PLEASE DON'T SMOKE IN THEIR HOME OR CAR UNTIL THEY ARE SECURE WITHOUT THEIR CIGARETTES. YOU DO THIS, AND THEY WON'T BUG YOU ABOUT YOUR SMOKING.

6. If you are traveling in a car together, you can plan to take "smoking stops" along the way. The smell of a cigarette in a small enclosed area like a car can be too tempting. PLEASE REMEMBER THAT ALL IT TAKES FOR US EX-SMOKERS TO GET STARTED ALL OVER AGAIN IS "ONE LITTLE PUFF."

7. If the smoker is having "grumpy days," please refrain from comments like, "Why don't you start smoking and be your nice ole self again?" because they might take you up on it because your friendship means a lot to them. But—you're fighting dirty; you might need to ask yourself **why** you resent their success. After all, they've pulled "the cigarette plug," and they may talk more and express their feelings more easily. IF YOU ARE A TRUE FRIEND, YOU WILL ALLOW THEM THESE IMPERFECTIONS, **AS THEY ALLOW YOURS.**

8. Change is frightening to all of us—whether it is negative or POSITIVE. It is easier to stay in a comfortable rut where we feel safe. Actually, we aren't safe,we are only rusting away. Change can be challenging—it doesn't have to be frightening. It all depends on your attitude, **they have had to change their attitude to quit smoking.** PLEASE ALLOW THEM THIS CHANGE. HELP THEM FEEL SECURE DURING THIS CHANGE!!

9. Make a pact with your friend. **You** make it easier for them to quit smoking and **they** will promise never to become a self-righteous ex-smoker.

10. And what is the best of all—if and when you decide to quit smoking, your act of friendship and support during their crisis will always be remembered and appreciated. THEY WILL BE A SUPPORTIVE FRIEND TO YOU IF YOU DECIDE TO QUIT SMOKING.

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APPENDIX C

Tobacco Laws

- Prohibiting Possession or Consumption by Minors (HB 0457)

- Youth Access to Tobacco Products Control Act (HB 0539)

AN ACT PROHIBITING THE POSSESSION OR CONSUMPTION OF TOBACCO PRODUCTS BY MINORS; PROVIDING FOR CRIMINAL MONETARY PENALTIES OR FOR ADJUDICATION BY A YOUTH COURT UPON CONVICTION; AND AMENDING SECTION 41-5-203, MCA. (HB 0457)

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Tobacco possession or consumption by persons under 18 years of age prohibited -- penalties. (1) A person under 18 years of age who knowingly possesses or consumes a tobacco product, as defined in 16-11-302, commits the offense of possession or consumption of a tobacco product.

(2) A person convicted of possession or consumption of a tobacco product:

(a) shall be fined $35 for a first offense, no less than $75 or more than $100 for a second offense, and no less than $100 or more than $250 for a third or subsequent offense; or

(b) may be adjudicated on a petition alleging the person to be a youth in need of supervision under the provisions of the Montana Youth Court Act provided for in Title 41, chapter 5.

(3) A person convicted of possession or consumption of a tobacco product may also be required to perform community service or to attend a tobacco cessation program.

(4) The fines collected under subsection (2) must be deposited to the credit of the general fund of the local government that employs the arresting officer, or if the arresting officer is an officer of the highway patrol, the fines must be credited to the county general fund in the county in which the arrest was made.

Section 2. Section 41-5-203, MCA, is amended to read:

"**41-5-203. Jurisdiction of the court.** (1) Except as provided in subsection (2), the court has exclusive original jurisdiction of all proceedings under the Montana Youth Court Act in which a youth is alleged to be a delinquent youth, a youth in need of supervision, or a youth in need of care or concerning any person under 21 years of age charged with having violated any law of the state or ordinance of any city or town other than a traffic or fish and game law prior to having become 18 years of age.

(2) Justice, municipal, and city courts have concurrent jurisdiction with the youth court over all alcoholic beverage, tobacco products, and gambling violations alleged to have been committed by a youth."

Section 3. Codification instruction. [Section 1] is intended to be codified as an integral part of Title 45, chapter 5, part 6, and the provisions of Title 45, chapter 5, part 6, apply to [section 1].

-END-

AN ACT AMENDING THE **YOUTH ACCESS TO TOBACCO PRODUCTS CONTROL ACT**; ASSESSING TOBACCO EDUCATION FEES; REQUIRING LICENSE SUSPENSIONS FOR PERSONS FAILING TO COMPLY WITH THE LAW; PROVIDING FOR THE DISPLAY OF WARNING SIGNS; PROHIBITING THE SALE OF SINGLE CIGARETTES; PROVIDING STATUTORY APPROPRIATIONS; AND AMENDING SECTIONS 16-11-144, 16-11-304, 16-11-307, 16-11-308, AND 17-7-502, MCA. (HB 0539)

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Section 16-11-144, MCA, is amended to read:

"**16-11-144. Revocation or suspension of license.** (1) The department may revoke or suspend the license of any wholesaler, subjobber, retailer, cigarette vendor, or person licensed under 16-11-303 for failure to comply with any provision of this part, The Montana Cigarette Sales Act (Title 16, chapter 10), the Youth Access to Tobacco Products Control Act (Title 16, chapter 11, part 3), or with any lawful rule of the department made pursuant to those laws.

(2) A person aggrieved by a revocation or suspension may apply to the department for a hearing, which must be open to the public, and may further appeal to the court.

(3) When a license has been revoked, a license may not again be issued to the licensee for a period of 1 year after revocation. When a license has been suspended, the suspension may be for any period not to exceed 1 year.

(4) A person who sells cigarettes after the person's license has been revoked or suspended is guilty of a misdemeanor and must be punished as provided in this part, and all cigarettes in the person's possession must be seized and forfeited to the state."

Section 2. Section 16-11-304, MCA, is amended to read:

"**16-11-304. Signs.** A retail seller of tobacco products shall conspicuously display, at each place on the premises at which tobacco products are displayed and sold, a sign that is to be provided without charge by the department of revenue that states: "Montana law prohibits the sale of tobacco products to persons under 18 years of age.""

Section 3. Section 16-11-307, MCA, is amended to read:

"**16-11-307. Distribution of tobacco products in other than sealed packages prohibited.** A person may not distribute a tobacco product for commercial purposes in other than a sealed package that is

provided by the manufacturer and that contains the health warning required by federal law. Single cigarettes may not be sold."

Section 4. Section 16-11-308, MCA, is amended to read:

"**16-11-308. Tobacco education fee.** (1) Failure to obtain a license as required by 16-11-303 or to post signs as provided in 16-11-304 is punishable by a civil penalty of $100. The department may collect the penalty in the manner provided for the collection of other debts.

(2) A person who violates 16-11-305(1) or 16-11-307 at any one location within a 3-year period shall be punished as follows:

(a) A first through third offense is punishable by a verbal notification of violation.

(b) A fourth offense is punishable by a written notice of violation to be sent by the department of corrections and human services to the owner of the establishment.

(c) A fifth offense is punishable by assessment against the owner of the establishment of a tobacco education fee of $500. The employee or other person who sold the tobacco product, the establishment manager, and the establishment owner, if the owner is a sole proprietor or partner, shall read and view the tobacco education material.

(d) A sixth offense is punishable by suspension of the licenses required by 16-11-120 and 16-11-303 for 3 months.

(e) A seventh and subsequent offense is punishable by suspension of the licenses required by 16-11-120 and 16-11-303 for 1 year.

(3) After 2 years from the first violation, if a person has not received notice of any further violations, a second violation is considered a first violation for the purposes of subsection (2).

(4) A license may not be reissued after suspension under subsection (2)(d) or (2)(e) unless tobacco education fees are paid in full.

(5) Tobacco education fees must be assessed and collected by the department of corrections and human services. Notice of an assessment pursuant to subsection (2) and this subsection must be made by the department of corrections and human services within 30 days of the alleged violation by certified letter addressed to the establishment owner or manager. The notice of assessment against the owner of the establishment must provide an opportunity for a hearing pursuant to the provisions of the Montana Administrative Procedure Act. Within 30 days from the date the notice of assessment was mailed, the

owner or manager shall notify the department of corrections and human services that the owner or manager objects to the assessment and request a hearing pursuant to this subsection.

(6) In addition to the penalty provided for in subsection (2), a first and subsequent violation of 16-11-305(1) or 16-11-307 is punishable by an assessment of a tobacco education fee of $25 against the employee who sold the tobacco product if the employee is not the owner of the establishment. The tobacco education fee must be assessed and collected by the department of corrections and human services. Within 30 days of the alleged violation, notice of assessment pursuant to this subsection must be made by the department of corrections and human services by certified letter addressed to the employee. The notice of assessment must provide an opportunity for a hearing pursuant to the provisions of the Montana Administrative Procedure Act. Within 30 days from the date on which the notice of assessment was mailed, the employee shall notify the department of corrections and human services that the employee objects to the assessment and requests a hearing pursuant to this subsection.

(7) The tobacco education material referred to in this section must be provided by the department of corrections and human services in the form of written and video self-teaching materials. The education materials may be used only for the purposes provided in this section. Upon completion of the self-teaching materials, the establishment owner or manager shall execute a written statement on a form provided by the department of corrections and human services verifying that the employee, owner, or manager, as appropriate, has read and viewed the self-teaching material and shall return the statement and the self-teaching video to the department of corrections and human services.

(8) Upon the sixth and subsequent violation of this section, the department of corrections and human services shall notify the department of revenue in writing to initiate suspension of the licenses required by 16-11-120 and 16-11-303 and shall notify the licensee in writing of the alleged violation and of the referral of the licensee's record of violations to the department of revenue for suspension of the licenses pursuant to 16-11-144 and this section. The department of revenue shall review the record of violations and may initiate license suspension proceedings in accordance with 16-11-144. If, upon a review of the record of violations, the department of revenue declines to initiate suspension proceedings, the violation may not be charged against the licensee for the purposes of this section.

(9) Fees assessed pursuant to this section must be deposited in an account in the state special revenue fund. One-half of the money in the account is statutorily appropriated, as provided in 17-7-502, to the department of corrections and human services to defray the costs of the tobacco education program.

One-half of the money in the account is statutorily appropriated, as provided in 17-7-502, to the department of revenue to defray the department's costs of implementing its duties pursuant to 16-11-144 and this section."

Section 5. Inspection and notification of violation required. (1) The department of corrections and human services shall conduct inspections of persons selling or distributing tobacco products to determine compliance with 16-11-303, 16-11-304, 16-11-305(1), 16-11-306, and 16-11-307. Inspections may be conducted directly by the department of corrections and human services or may be provided for by contract let by the department of corrections and human services. Persons found to be in violation of the requirements of this part or the rules of the department of corrections and human services a fourth and subsequent time must be notified in writing by the department of corrections and human services of the facts of the violation and the penalties provided by this part.

(2) The department of corrections and human services shall provide documentation of alleged violations of 16-11-303, 16-11-305, and 16-11-307 to the department of revenue.

Section 6. Minors not liable for possession. An individual under 18 years of age assisting in the enforcement of this part is not liable under a civil or criminal law for the possession of a tobacco product possessed for the purposes of enforcing this part.

Codification instruction. [Sections 5 and 6] are intended to be codified as an integral part of Title 16, chapter 11, part 3, and the provisions of Title 16, chapter 11, part 3, apply to [sections 5 and 6].

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